

### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

May 4, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

C&C Property Management et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via email. If you do not approve of the language on the complaint, DO NOT sign it; instead, contact me at the number listed below to discuss your concerns.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely.

Neha Singh
Neha Singh
Associated Governemnt Program Analyst
510-789-1034
neha.singh@dfeh.ca.gov



**DFEH NUMBER** COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE **C&C** Property Management 855 Pacific Street (831) 372-1964 Monterey, CA 93940 PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED Apartment 8



#### DFEH NUMBER

- Allegation 1 -

#### I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

May 3, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

From May 31, 2017 to current, I was denied a reasonable accommodation/interactive process while residing in my one-bedroom unit located at the subject property is owned by the subject property Management Company and its employee The subject property has 6-8 units. My rental amount is \$1,475.00.

I believe I was denied a reasonable accommodation due to my disability (physical).

From May 31, 2017 to current, I made a reasonable accommodation request every month to C&C Property Management to add screen to my window because the dust that comes into my unit from window affected my disability. Respondent, denied my reasonable accommodation request and stated that the owner said it was not a necessary repair and therefore, not required, which exacerbated my disability. In addition, Respondents failed to engage in an interactive process.

This is a violation of Government Code, Section 12955, Subdivision (a) and Civil Code 51.

- Allegation 2 -

### I ALLEGE THAT I EXPERIENCED

Retaliation

ON OR BEFORE

March 15, 2018

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Requested or used a disability-related accommodation; Reported or resisted any form of discrimination or harassment

AS A RESULT, I WAS SUBJECTED TO

Evicted

#### **PARTICULARS**

On March 15, 2018, I was served with a retaliatory eviction for engaging in a protected activity (requested a reasonable accommodation and filing this complaint).

From March 2017 to current, I made a reasonable accommodation request to have a screen put on my window because the dust affected my disability. In addition, on November 15, 2017, I filed a complaint with the Department of Fair Employment and Housing against the Respondents and provided a copy of the allegations to On March 15, 2018, I was served with a retaliatory eviction and I am being required to move out on May 21, 2018.

This is a violation Government Code, Section 12955, Subdivision (f) and Civil Code 51.



#### **DFEH NUMBER**

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

May 14, 2018



Dear

### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

January 25, 2018	Via Email:
RE: Request to Approve Complaint DFEH Number: Kalpro Corp. et al.	

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please follow the Adobe EchoSign instructions to sign and return the complaint via email. If you do not approve of the language on the complaint, do not sign it; instead, contact me immediately at my direct telephone number or email address listed below my signature to discuss your concerns.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Adele Cox

Adele Cox Associated Governmental Program Analyst (510) 789-1060 adele.cox@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

(COPONDENT(O)

**ADDRESS** 

PHONE

Kalpro Corp.

36616 Tierra Subida Avenue Palmdale, CA 93551

AGENT FOR SERVICE

Agent for Service for

Kalpro Corp.

**ADDRESS** 

36616 Tierra Subida Avenue Palmdale, CA 93551 PHONE

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

12

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED
Retaliation
ON OR BEFORE
September 1, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED

Page 1 of 3



### **DFEH NUMBER**

Requested or used a disability-related accommodation  AS A RESULT, I WAS  Subjected to a rental increase and different lease terms  PARTICULARS  On or about September 1, 2017, I was retaliated against while residing in my 1-bedroom apartment located at the subject property of where the violation occurred. The owner is Kalpro Corp. The individual owner is and the property manager is  My rent is \$1393.  On or about June or July 2017, the owner,
(ESA) due to my disability. On or about July 24, 2017, I attempted to renew my yearly lease, however, on or around August 2017 or September 2017, I received a letter stating my lease was converted to month-to-month and I was subjected to a 3% rent increase. I believe this was in retaliation for obtaining an ESA.
This is a violation of Government Code 12955, Subdivision (f)
- Allegation 2 -
I ALLEGE THAT I EXPERIENCED  Discrimination  ON OR BEFORE  December 9, 2017  BECAUSE OF MY ACTUAL OR PERCEIVED  Disability (physical or mental)  AS A RESULT, I WAS SUBJECTED TO  Denied reasonable accommodation for a disability  PARTICULARS  On December 2, 2017, and December 9, 2017, I was denied a reasonable accommodation/interactive process based on my disability (mental).  On or about November 2017, I notified the owner, that I needed the laundry room hours extended as a reasonable accommodation due to my disability. On or around December 2, 2017, I received a letter from denying my reasonable accommodation. On or around December 2017, I notified that he was discriminating against me by not extending the laundry room hours based on my disability. On December 9, 2017, I received another letter from denying my reasonable accommodation request yet again. The denial exacerbated my disability and failed to engage in an interactive process.
This is a violation of Government Code 12955, Subdivision (a).
- Allegation 3 -
I ALLEGE THAT I EXPERIENCED  Retaliation ON OR BEFORE December 20, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Requested or used a disability-related accommodation AS A RESULT, I WAS SUBJECTED TO Harassment PARTICULARS



#### **DFEH NUMBER**

On December 6, 2017 and on December 20, 2017, I was subjected to visual harassment in retaliation for making a reasonable accommodation request.

On December 6, 2017 and on December 20, 2017, after being denied a reasonable accommodation request to extend the laundry hours, the property manager subjected me to visual harassment by following me and taking pictures of me when I used the laundry room, which created a hostile living environment.

This is a violation of Government Code 12955, Subdivision (f).

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Jan 25, 2018



### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

May 7, 2018

	Via Email:	
RE: Request to Approve Complaint DFEH Number:		

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please follow the Adobe EchoSign instructions to sign and return the complaint via email. If you do not approve of the language on the complaint, do not sign it; instead, contact me immediately at my direct telephone number or email address listed below my signature to discuss your concerns.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Adele Cox

Adele Cox Associated Governmental Program Analyst (510) 789-1060 adele.cox@dfeh.ca.gov



#### **DFEH NUMBER**

COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED Apartment 6



DFEH NUMBER

Allegation 1 -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE October 6, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

From on or about September 1, 2016 to October 6, 2017, I was denied reasonable accommodation/interactive process while residing in my two-bedroom unit located at the address where the violation occurred. The subject property is owned and managed by The subject property has 12 units. My rental amount is \$1667.

I believe I was denied a reasonable accommodation due to my disability (physical).

From on or about September 1, 2016 to October 6, 2017 I requested to have trash cans placed near my unit because my disability restricts the weight and height of items I can lift, and prevents me from using the dumpster for my trash. In addition, I have requested to have the sliding patio doors in my unit adjusted to reduce the amount of force needed to open/close them. I was told by amount of force needed to open/close them. I was told by the state of the will not accommodate my disability, and I should go find a place that does. These denials exacerbated my disability. In addition, the state of the state engage in an interactive process.

This is a violation of Government Code, Section 12955, Subdivision (a) and Civil Code 51.

- Allegation 2 -

### I ALLEGE THAT I EXPERIENCED Harassment ON OR BEFORE October 6, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental)

**PARTICULARS** 

From on or about October 2016 to October 6, 2017, I was subjected to harassment while residing at the subject property by the owner,

I believe I was subjected to harassment due to my disability (physical).

From on or around October 2016 to October 6, 2017, repeatedly demanded that I move or break up heavy furniture and put into the dumpster as a way to harass me because if I did not do it, he would evict me. is well aware of my weight and height restrictions as this was shared with him from October 2016 to October 6, 2017. This harassment created a hostile living environment.

This is a violation of Government Code Section 12955, Subdivision (a).



#### **DFEH NUMBER**

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
October 6, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO
Denied equal terms and conditions
PARTICULARS

From on or about October 2016 to October 6, 2017, I was subjected to differential treatment while residing at the subject property.

I believe I was subjected to differential treatment due to my disability (physical).

From October 2016 to October 6, 2017, Respondent, would not allow me to operate a business from my unit, however, I am aware of a non-disabled tenant who was allowed to operate a business from her unit.

In addition, my guests and customers were not allowed to park at the subject property, however, I am aware of non-disabled tenants who were allowed to have their guests or customers park at the subject property.

This is a violation Government Code, Section 12955, Subdivision (a) and Civil Code 51.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

May 16, 2018



### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 20, 2018

Via Email:	
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RE: Request to Approve Complaint

DFEH Number:

FPI Management, Inc. et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please follow the Adobe EchoSign instructions to sign and return the complaint via email. If you do not approve of the language on the complaint, do not sign it; instead, contact me immediately at my direct telephone number or email address listed below my signature to discuss your concerns.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Adele Cox

Adele Cox Associated Governmental Program Analyst (510) 789-1060 adele.cox@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

FPI Management, Inc.

**ADDRESS** 

PHONE

800 Iron Point Rd.,

Folsom, CA 95630

(916) 357-5300

Seasons Apartments, LP

369 San Miguel Dr.,

Newport Beach, CA 92660

9167144400

AGENT FOR SERVICE

**ADDRESS** 

PHONE

Paracorp Incorporated, Agent for Service for Seasons Apartments, LP 2804 Gateway Oaks Drive, Suite 100 Sacramento, CA 95833

Mike Watembach, Agent for Service for FPI Management, Inc.

800 IRON POINT ROAD FOLSOM, CA 95630

9163575312

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

220



#### **DFEH NUMBER**

Allegation 1 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
August 25, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

From July 2016 to current, my requests for reasonable accommodations were denied and/or delayed and I was denied an interactive process while residing at my 1-bedroom unit located at the address where the violation occurred. The monthly rent is \$658. There are 220 units. The property is owned by Seasons at Laguna Ridge, and managed by FPI Management Inc. The person who denied and/or delayed my reasonable accommodation/failed to engage in an interactive process was a manager for FPI Management Inc.

From July 2016 through September 2017, I requested a reasonable accommodation from manager via email and letter to have my next door neighbor cease smoking in the unit or on the balcony as her cigarette smoke was infiltrating into my unit through the vents. The smoking continued thus denying my reasonable accommodation. In addition, failed to engage in an interactive process. Although moved my next door neighbor on or around October 1, 2017, as an accommodation, the delay to reasonably accommodate me from July 2016 to September 2017 exacerbated my disability.

From September 2017 through current, I requested a reasonable accommodation from managers via email and letter for mold in my HVAC system to be removed and the HVAC system repaired, as the mold severely exacerbated my disability. I have provided supporting medical documentation. Abatement actions taken have been minimal, and my concerns have been ignored.

This is a violation of Government Code Sections 12955, Subdivision (a) and Civil Code 51.

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED

Retaliation

ON OR BEFORE

November 16, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Requested or used a disability-related accommodation

AS A RESULT, I WAS SUBJECTED TO

Evicted

**PARTICULARS** 

On or around November 16, 2017, I was served with a letter threatening to serve me with a Three-Day Notice to Perform Covenants or Quit that I believe is in retaliation for my request for reasonable accommodation of a smoke-free environment which was requested on or around September 29, 2017.



#### DFEH NUMBER

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Mar 20, 2018



### **DEPARTMENT OF FAIR EMPLOYMENT & HOUSING**

2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

January 10, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint
DFEH Number:
et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at sack.keophimane@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Sack Keophimane
Associate Governmental Program Analyst
916-585-7078
sack.keophimane@dfeh.ca.gov



DFEH NUMBER		
	<b>36</b> 0	
The state of the s		
*		
COMPLAINANT	ADDRESS	PHONE
	*	
		TYPE OF DISCRIMINATION AND LAW
,		Government Code § 12955
NAMED IS THE EMPLOYER, PERSON,	AGENCY, ORGANIZATION OR GOVERNMEN	IT ENTTITY WHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
w.		
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS
House	OCCORNED	_
110000		1
LALL FOR THAT I EVER DIENOGE	- Allegation 1 -	
Discrimination	,	19.1
ON OR BEFORE August 23, 2017		
BECAUSE OF MY ACTUAL OR P Disability (physical or mental)	PERCEIVED	
AS A RESULT, I WAS SUBJECTI		
Denied equal terms and conditions PARTICULARS		
Respondent to an ad listed on Crain Respondent to call me back	gslist.org for a rental property priced a k.	at \$1500 per month. I left a message for
On August 23, 2017, Respondent	contacted me over the phone.	I told Respondent that my fiancé
and I were interested in renting the	house. Respondent asked abity Disability Insurance (SSDI). Respo	out my income. I told him that I was not
disabled people are not reliable wit	th their rent and will not rent to them. I	ndent proceeded to say that Respondent did not even want to



#### **DFEH NUMBER**

factor my SSDI benefit together with my fiancé's income. I asked Respondent don't you want to know about me? In reply, Respondent stated: I do not want to know about you. Why aren't you working? Why can't you work like the rest of society? As a result, Respondent said I was not a good fit to rent his house, believe I was discriminated, harassed, and denied rental due to my source of income and disability.
Moreover, I asked Respondent if he would accept my two dogs as Emotional Support Animals (ESA). I told him that I have documentation for them. Respondent stated he would charge me a \$500 dollar depose per dog. I believe Respondent wanting to charge me a \$500 deposit for each ESA was discriminating due to my disability.
Furthermore, Respondent asked questions about my disability that was irrelevant and inappropriate. For instance, Respondent asked me about my weight and height. I believe Respondent was implying that a disabled person like me must be overweight and sloppy. I could hear one of his friends laughing in the background while Respondent was asking me these questions. Therefore, I believe I was subjected to discriminatory statements based on my disability.
- Allegation 2 -
I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
August 23, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED
Sex/Gender
AS A RESULT, I WAS SUBJECTED TO
Subjected to discriminatory statements/advertisement
PARTICULARS  Further during our phase conversation. Respondent
Further during our phone converstation, Respondent stated he wanted to do business with the man of the house. I perceive this statement as discrimination against my gender (female) and not wanting to do business with a woman.
As a result, I was discriminated and denied rental due to my sex (female) and disability.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

Signature of Complainant or Complainant's Legal Representative:	Date:
	Jan 11, 2018

was "psychotic" and that I heard voices.



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DFEH NUMBER PHONE **ADDRESS** COMPLAINANT TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME ADDRESS PHONE RESPONDENT(S) NO. OF UNITS ADDRESS WHERE VIOLATION PROPERTY TYPE **OCCURRED** House - Allegation 1 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE August 1, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO Subjected to discriminatory statements/advertisement **PARTICULARS** On or about August 2017, Respondent made discriminatory statements about my disability, including that I



DFEH NUMBER

- Allegation 2 -	
I ALLEGE THAT I EXPERIENCED  Discrimination  ON OR BEFORE  September 20, 2017	3
BECAUSE OF MY ACTUAL OR PERCEIVED  Disability (physical or mental); Gender identity or expression; Race; Sex/Gender; Sexual orien  AS A RESULT, I WAS SUBJECTED TO	fation
Denied equal terms and conditions  PARTICULARS  On or about September 20, 2017, I reported to Respondent that my roommate was being	g violent towards
me, damaging my property and making discriminatory statements about my sexual orientation complaint, Respondent threatened to give us both a 30-day notice and ultimately allowe stay for months without concerns for my safety. I believe Respondent (who is Filipina) dime and failed to address my safety concerns because of my disability (mental), Race (Africansexual orientation.	d my roommate to iscriminated against
	*
SIGNED UNDER PENALTY OF PERJURY  By submitting this complaint I am declaring under penalty of perjury under the laws of the State the foregoing is true and correct of my own knowledge, except as to matters stated on my information as to those matters I believe them to be true.	
Signature of Complainant or Complainant's Legal Representative:	Date:
	3-1-18
Printed Name	



DFEH NUMBER

COMPLAINANT

ADDRESS

PHONE

#### TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

Charities Housing Development Corporation of Santa Clara County **ADDRESS** 

PHONE

1400 Parkmoor Ave., Ste. 190 San Jose, CA 95126 (408) 550-8300

AGENT FOR SERVICE

Dan Wu, Agent for Service for Charities Housing Development Corporation of Santa Clara County **ADDRESS** 

PHONE

1400 Parkmoor Ave., Ste. 190 San Jose, CA 95126

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

43



DFEH NUMBER	
	The state of the s
- Allegation 1 -	
I ALLEGE THAT I EXPERIENCED	
Discrimination	
ON OR BEFORE January 5, 2017	
BECAUSE OF MY ACTUAL OR PERCEIVED	
Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO	
Denied reasonable accommodation for a disability or medical condition	
PARTICULARS	
On or about January 5, 2017, there was a break in and theft in my apartment that r and exacerbated my disability (mental). Therefore, I submitted a reasonable accompany	
Respondent asking that I be allowed to install security equipment in my	
immediately denied my reasonable accommodation request and failed to engage in	
E 200 - 00 - 00	
- Allegation 2 -	
I ALLEGE THAT I EXPERIENCED Retaliation	
ON OR BEFORE	
August 1, 2017	
BECAUSE OF MY ACTUAL OR PERCE!VED  Reported or resisted any form of discrimination or harassment	
AS A RESULT, I WAS SUBJECTED TO	
Denied equal terms and conditions PARTICULARS	
On or about August 2017, Respondent raised my rent by \$200. I have	personal knowledge that
Respondent aised my rent a disproportionate amount in comparison to	other tenants on many
occasions. I believe the rent increases are in retaliation for filing a discrimination occasions. I with HUD in 2015.	emplaint against Respondent
With Hob in 2010.	
SIGNED UNDER PENALTY OF PERJURY	
By submitting this complaint I am declaring under penalty of perjury under the laws	of the State of California that
the foregoing is true and correct of my own knowledge, except as to matters stated	
and as to those matters i believe them to be true.	2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2 (2
Signature of Complainant or Complainant's Legal Representative:	Date:
	3-6-2010/
	3-6-2018
Printed Name	

RE: Request to Approve Amended Complaint

DFEH Number: HUD Number:

Dear

We have amended your complaint based on the changes you requested. Please read the proposed amended complaint carefully. If you do not approve of the language on the complaint, do not sign it; instead, contact me within ten (10) calendar days to discuss your concerns. If you agree with the language, please sign and return the amended complaint as soon as possible. We must receive the signed complaint before it can be investigated. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at albert.rodgers@dfeh.ca.gov or by fax to 1-888-519-5917.

Please note the information you provide is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq. Thank you for your cooperation.

Sincerely,

Albert Rodgers

Staff Services Analyst (916) 585-7073

Albert.Rodgers@dfeh.ca.gov

A.C-12-



DFEH NUMBER		HUD NUMBER
	¥	
COMPLAINANT	ADDRESS	PHONE
	TYI	PE OF DISCRIMINATION AND LAW
		Government Code § 12955
		Civil Code § 51, et seq.
NAMED IS THE EMPLOYER, PERSO	N, AGENCY, ORGANIZATION OR GOVERNMENT EN	TTITY WHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
PROPERTY TYPE	ADDRESS WHERE VIOLATION	NO. OF UNITS
	OCCURRED	
Apartment		10
I ALLEGE THAT I EXPERIENCE	- Allegation - ED	
Discrimination ON OR BEFORE		
November 9, 2017		
BECAUSE OF MY ACTUAL OR	RPERCEIVED	
Disability (physical or mental) AS A RESULT, I WAS SUBJECT	TED TO	
	tion for a disability or medical condition	
	in your own words. You are limited to 5000 o	characters.

On or about September 21, 2017 Complainant received a No Cause 90-Day Notice to Vacate. Respondent verbally informed Complainant the reason was because the Housing Authority was going to perform an inspection of the property and Respondent did not wish to make any required repairs.

impaired his ability to leave his apartment for extended periods for the past four months.

is disabled as defined by the federal Fair Housing Act. Respondent is Complainant suffered a fractured hip in late June 2017 that required surgery and has

File Date: December 6, 2017

Amended

Page 1 of 2



DFEH NUMBER	HUD NUMBER
	School Asset Tradition and Bernston and

On October 20, 2017 Complainant submitted a request that the Notice to Vacate be extended until Complainant recovers from his hip surgery and can find replacement housing. Complainant states he does not expect to fully recover for three to four months beyond the date Respondent expects Complainant to move. Complainant also submitted medical verification of the disability and need for the accommodation from a treating physician. On October 27 Complainant received a hand written denial of the accommodation request from Respondent.

On November 8, 2017 Complainant resubmitted the Accommodation Request for extending the time to vacate until he has recovered and is able to secure housing. The letter included a letter from his treating physician stating that the Complainant cannot resume looking for an apartment due to his disability until his expected recovery February 1, 2018. Respondent again denied the request on November 9, 2017.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	Jan 4, 2018

File Date: December 6, 2017

Amended



DFEH NUMBER		
COMPLAINANT	ADDRESS	PHONE
		TYPE OF DISCRIMINATION AND LAW
		Government Code § 12955
		*
NAMED IS THE EMPLOYER, PERSON, A	GENCY, ORGANIZATION OR GOVERNI	MENT ENTTITY WHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
Franklin Management	4604 Cahuenga Blvd Toluca Lake, California 916	(818) 985-4129 602
PROPERTY TYPE	ADDRESS WHERE VIOLATION	ON NO. OF UNITS
Apartment		48



#### DFEH NUMBER

- Allegation -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

August 15, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

On or about August 15, 2017 I requested a reasonable accommodation from management to fix the elevator and was denied due to my disability. I lived on the 3rd floor and my disability limited my mobility to go up and down the stairs. With the elevator consistently out of order, it was difficult for me to go between floors. As a result of my reasonable accommodation being denied, I was forced to move from the premises.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	,	DATE:
	4/16	//8

RECEIVED

APR 1 6 2018

Dept. of Fair Employment & Housing Los Angeles Regional Office





Dear

### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 800-884-1684 | TDD 800-700-2320 www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

August 14, 2017

	Sent via Echosign:
RE: Request to Approve Complaint  DFEH Matter Number:  California Department of Ve	terans Affairs

This notice confirms that you have filed an inquiry and have been interviewed by a Department of Fair Employment and Housing (DFEH) representative. You must approve, sign and return the complaint before it can be investigated. If you do not approve the language on the complaint, please do not sign the complaint; instead, contact me to discuss your concerns. If you do not return the signed complaint within 10 days, your inquiry will be closed and no further action will be taken.

Please return the signed complaint by mail to DFEH, 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758 or by email to the email address below or by fax to 888•519•5917.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Of amin

Camilla Asuncion Staff Services Analyst (916) 585-7086 camilla.asuncion@dfeh.ca.gov

# COMPLAINT OF DISCRIMINATION BEFORE THE STATE OF CALIFORNIA DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING Under the California Unruh Civil Rights Act (Civ. Code, § 51)

Complaint of Complainant.	DFEH No.
vs.	
California Department of Veterans Affairs Respondent. c/o Veterans Home of California – Lancaste 45221 30th Street West Lancaster, CA 93536	•
- Administrator, As an individu Respondent. c/o The William J. "Pete" Knight Veterans Ho California 45221 30th Street West Lancaster, CA 93536	
THE PARTICULARS ARE:	
alleges that respondent to complainant. Complainant was denied full facilities, privileges, or services by a busine and public entities because of one or m (which incorporates Civil Code section 51) Engagement in protected activity.	ess establishment, including both private ore Fair Employment and Housing Act
2. My belief is based on the following: I be against at The William J. Pete Knight Ve Street West, Lancaster, CA term residential care facility owned and of Veterans Affairs. The facility is managed in	terans Home of California, 45221 30th 93536. The property is a 60-bed, long- perated by the California Department of

My belief is based on the following:

- a. On or about January 16, 2017, which was the Martin Luther King, Jr. holiday, I was denied food service by the dining services staff [which is predominantly non-African American]. I believe they refused service to me in the dining hall on this day due to my race.
- b. On or about January 23 and January 31, 2017, I engaged in a protected activity when I complained of the denial of service due to my race to The William J. Pete Knight Veterans Home of California management, including Administrator non-African American].
- c. On or about March 28, 2017, the dining services staff retaliated against me by continuing to refuse service to me.
- 3. Complainant resides in the City of State of CA.

### **VERIFICATION**

am the Complainant in the above complaint. I have read the above complaint and know its contents. I declare under penalty of perjury under the laws of the State of California that the above is true and correct of my own knowledge, except as to those matters alleged on information and belief, which I also believe to be true.

Signature of Complainant or Complainant's Legal Representative:

Date: Aug 14, 2017



STATE OF GALE CRIMA | Department of Fair Singstyment and recurry

# COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DIFEH NUMBER

HUD NUMBER

COMPLAINANT(S)

ADDRESS

PHONE

OTHER AGGRIEVED PARTIES

TYPE OF DISCRIMINATION AND LAW

General - 12955 a

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT

ADDRESS.

PHONE

BRE Paragon MF Crystal View CA

233 S. Wacker Drive #4200, Chicago, IL.

60606-6310

AGENT POR SERVICE

ADDRESS

PHONE

Lawyers Incorporating Service

222 S. Riverside PLZ #200, Chicago, IL 60606

CO-RESPONDENT(S)

ADDRESS

PHONE

12156 Bayport Street, Garden Grove, CA 92840

(714) 930-2350

c/o Crystal View Apartments

12156 Bayport Street, Garden Grove, CA 92840

(714) 930-2350

c/o Crystal View Apartments



DEFRUMBER		LETT BENNOTU
PROPERTY TYPE Apartment	ADDRESS WHERE VIOLATION OCCURED	NO. OF UNITS 402
JALLEGE THAT LEXPERIENCED	Discrimination	
ON OR BEFORE	September 10, 2016	
SECAUSE OF MY ACTUAL OR PERCEIVED	Disability	
AS A RESULT, TWAS	Denled reasonable accommodation, Denied rental/lease/sale	
complex located at The owners are BRE Paragon MF Crys  II. I believe that I was denied and (on file with DFEH). This is a violation following:	reasonable accommodation and denied rental based of Government Code section 12955 [a]. My belief is	upon my disability based upon the
<ul> <li>On or around August 16, 2016, was August 25, 2016.</li> </ul>	I applied and was approved for a unit. The agreed u	pon move in date
made who denied my request in	leasing representative LNU that I needed to bility and being unable to physically move until such the least I agreed to pay a fee of \$105.00 due to the delable being unable to move at that time due to my disability.	ime. referred
c. On September 10, 2016, I received a corporate which exasperated my disab	my full deposit back but only after I consistently argue tillty by the financial strain and loss of housing.	d my case to



### STATE OF GALIFORNIAL Department Pair Ediployment and Minary

HOUSING.

### COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

规心,似熟练的

SIGNED LANDER PENALTY OF PERILEY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

Signature of Complainant or Comp	lainant's Legal Representative:	Date:
	And the second of the second o	2/13/1
Printed Name:		
	and the second s	



### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

February 12, 2018

Via [First Class Mail] [Email]

RE: Request to Approve Complaint DFEH Number:

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at shaynah.williams@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Shaynah Williams Staff Services Analyst 213-337-4497 shaynah.williams@dfeh.ca.gov



DFEH NUMBER		
COMPLAINANT	ADDRESS	PHONE
	TY	PE OF DISCRIMINATION AND LAW
		Government Code § 12955 Civil Code § 51, et seq.
NAMED IS THE EMPLOYER, P	ERSON, AGENCY, ORGANIZATION OR GOVERNMENT EN	TTITY WHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS
Apartment		2
	- Allegation -	
I ALLEGE THAT I EXPER	IENCED	
ON OR BEFORE		
November 8, 2017		
BECAUSE OF MY ACTUA		
Disability (physical or mental) AS A RESULT, I WAS SUB		
Denied reasonable accommod	ation for a disability or medical condition	
PARTICULARS	4.5	
electronic communication rath	th in writing and verbally that the owner, er than through paper notices due to his frequent hosp to accommodate Complainant's request and continue	



#### DFEH NUMBER

SIGNED UNDER PENALTY OF PERJUR	SIGNEL	UNDER	PENALTY	OF PER HIR
--------------------------------	--------	-------	---------	------------

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	02/16/2018

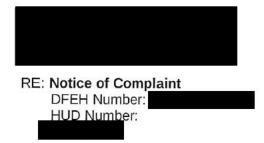


#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 800-884-1684 | TDD 800-700-2320 www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

DIRECTOR KEVIN KISH

September 29, 2017



Dear

This notice confirms that you have filed a housing inquiry and have been interviewed by a Department of Fair Employment and Housing representative. You must approve, sign and return the complaint before it can be investigated. If you do not approve the language on the complaint, please do not sign the complaint; instead, contact me to discuss your concerns. If you do not return the signed complaint within 5 days, your inquiry will be closed and no further action will be taken.

Please return the signed complaint using the Adobe EchoSign electronic signature. If you need further assistance, please feel free to contact the toll free telephone number at (800) 884-1684 with any questions you may have.

Please note that the information you provided is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Lilian Maher Consultant II 510-789-1061 Iilian.maher@dfeh.ca.gov



	HUD NUMBER
ADDRESS	PHONE
TYPE C	DF DISCRIMINATION AND LAW General - 12955 a
ORGANIZATION OR GOVERNMENT ENTITY WHO D	
ADDRESS	PHONE
ADDRESS	PHONE
ADDRESS	PHONE
	ORGANIZATION OR GOVERNMENT ENTITY WHO D ADDRESS ADDRESS



DFEH NUMBER		HUD NUMBER
PROPERTY TYPE House	ADDRESS WHERE VIOLATION OCCURED	NO. OF UNITS 2
I ALLEGE THAT I EXPERIENCED	Discrimination	
ON OR BEFORE	October 01, 2016	
BECAUSE OF MY ACTUAL OR PERCEIVED	Disability - [physical or mental]	
AS A RESULT, I WAS	Denied reasonable accommodation, Evicted	
and threatened with eviction from my room were 2 rental units in the property. At release owners.	evant times, the property was owned by  The property was occupied a	There and managed by the
II. I believe I was harassed, denied reason violation of Government Code section 129	nable accommodation and evicted because of my dis 955(a). My belief is based on the following:	sability, which is a
a. I lived in the subject property for approxincident and I disclosed my disability. On a episode, I would have to move out. This a		
b. On or around August 19, 2016, I told who was on notice of my of my disability and created a hostile living en	about safety concerns about the subject disability, laughed at me and told me to deal with it. Invironment.	ct property. This exacerbated
c. In or around August 27, 2016, I became door while I was hospitalized subsequent to 2016.	e aware of notices terminating my tenancy, which we to the August 19, 2016 lock-out. I was forced to mov	re posted on my ve out on October 1,



DFEH NUMBER

HUD NUMBER

SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

Signature of Complainant or Complainant's Legal Representative:

Date: Sep 29, 2017



DFEH NUMBER

COMPLAINANT

ADDRESS

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

Terra Lago Home Owners Association

ADDRESS

PHONE

7603461161

Associa Property Management

Indio, California 92203

42-635 Melanie Place Ste. 103 Palm Desert, CA 92211

7603461161

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

House

500+



DFEH NUMBER

- Allegation -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

August 8, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

PARTICULARS

Complainant made an official reasonable modification request supported by a doctor's recommendation, to the Homeowner's Association Design Review Committee on August 8, 2017. Complainant received a letter denying the request on August 10, 2017.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

FEB 21,2018



DFEH NUMBER

COMPLAINANT

ADDRESS

PHONE

#### TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITYY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

ADDRESS

PHONE

Quail Run Apartments

14131 Yorba St. Tustin, CA 92780

Riverside Charitable Corporation

444 S Flower St Ste 3100 Los Angeles, CA 90071

AGENT FOR SERVICE

ADDRESS

PHONE

Agent for Service, Agent for Service for Quail Run

Apartments

3200 Douglas Blvd., Suite 200 Roseville, CA 95661

9167736060

Agent for Service for Riverside Charitable Corporation

444 S Flower St Ste 3100 Los Angeles CA 90071

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

104



DFEH NUMBER

- Allegation -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

February 1, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

PARTICULARS

On or before February 2018 I made a reasonable accommodation request to move into a first floor unit. he manager who I made these requests to, was informed via doctor's recommendation and verbally of my disabilities and my need for a first floor apartment. I believe that I have been denied a reasonable accommodation request based on my disabilities.

SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

5-7-18



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

April 4, 2018

Via [First Class Mail] [Email]

RE: Request to Approve Amended Complaint

DFEH Number:

**HUD Number:** 

BRE Alameda/MF Property Owner LLC et al.

Dear

We have amended your complaint based on the changes you requested. Please read the proposed amended complaint carefully. If you do not approve of the language on the complaint, do not sign it; instead, contact me within ten (10) calendar days to discuss your concerns. If you agree with the language, please sign and return the amended complaint as soon as possible. We must receive the signed complaint before it can be investigated. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please note the information you provide is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq. Thank you for your cooperation.

Sincerely,

Mario Anzaldua

Associate Governmental Program Analyst

Mario Suzaldia

916-585-8153

mario.anzaldua@dfeh.ca.gov



DFEH NUMBER HUD NUMBER

COMPLAINANT ADDRESS

PHONE

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

BRE Alameda/MF Property Owner LLC

**ADDRESS** 

222 S Riverside Plaza Suite 2000 Chicago, IL 60606

FPI Management, Inc.

800 Iron Point Rd. Folsom, CA 95630

(916) 357-5300

Lincoln University Extensions - Housing

401 15th St. Oakland, CA 94612

(510) 628-8010

KW Alameda, LLC

151 S. El Camino Beverly Hills, CA 90212

(310) 887-6400

AGENT FOR SERVICE

Agent for Service for FPI Management, Inc.

File Date: March 12, 2018

Amended

**ADDRESS** 

800 Iron Point Rd. Folsom, CA 95630 PHONE

(916) 357-5312

Page 1 of 4



**DFEH NUMBER** 

**HUD NUMBER** 

CSC - Lawyers Incorporating Services, Agent for Service for BRE Alameda/MF Property Owner LLC

2710 Gateway Oaks Drive, Suite 150N Sacramento, CA 95833

Agent for Service for Lincoln University Extensions - Housing

401 15th Street Oakland, CA 94612

(C T CORPORATION SYSTEM), Agent for Service for KW Alameda, LLC

818 W Seventh Street, Suite 930 Los Angeles, CA 90017

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

100

File Date: March 12, 2018

Amended



**DFEH NUMBER HUD NUMBER** - Allegation -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE November 30, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO Denied reasonable accommodation for a disability or medical condition **PARTICULARS** Complainant is is a disabled person as defined by the federal Fair Housing Act. Respondents are FPI Management Inc. (property management company), Senior Vice President of Corporate Operations at FPI Management), (regional manager), (onsite manager), and BRE Alameda I MF Property (owner). Summer House Apartments, the subject property, is a 390-unit apartment complex. Complainant was a student at Lincoln University, which provided Complainant housing by renting an apartment at the subject property and subletting it to Complainant and four other students attending Lincoln University. Complainant lived at the subject property from August 4, 2017 through November 30, 2017. Complainant states that in or around October 2017, he made complaints to Senior Vice President of Corporate Operations at FPI Management) about "extreme and continuous pounding noise on the ceiling," which "caused severe disturbance and affected [his] attempts to recover from PTSD." Complainant describes the noise as "loud banging or pounding on the ceiling," "as if someone was running or jumping, or dropping heavy objects on the ground." The noise was sporadic and started as early as 4am until 12 noon, and started again around 3pm until responded to Complainant by stating that he relayed this information to and promised that Complainant's concerns would be addressed. Shortly thereafter, \_NU looked into the issue, but claimed not to have found any noise issues. Respondents did not engage in an interactive process with Complainant. On October 29, 2017, Complainant contacted the Alameda Police Department and filed a police report. Two police officers investigated the matter and spoke to LNU. LNU told the police officers that she acknowledged that the parents living in apartment 310 above Complainant's unit were working on solutions to the noise problem involving their children. After the police report was filed, Complainant states that there was a "dramatic and violent increase in the noise," describing it as "if someone was deliberately slamming something on

Complainant states that later in November he received two separate notices of lease violations from Respondents due to reports of smoking and noise, which Complainant describes as false and alleges were retaliation for requesting an accommodation. On November 30, 2017, Complainant moved out due to the ongoing issues he was encountering with his housing.

File Date: March 12, 2018

Amended

the floor."



# AMENDED COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE

A CONTRACTOR OF THE PARTY OF TH	CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT	

DF	EH	NL	JME	3ER

**HUD NUMBER** 

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

#### SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Apr 4, 2018

File Date: March 12, 2018

Amended

#### **DEPARTMENT OF FAIR EMPLOYMENT & HOUSING**

2218 Kausen Drive, Sufte 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

January 25, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

Community Development Properties et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at sack.keophimane@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Sack Keophimane Associate Governmental Program Analyst 916-585-7078 sack.keophimane@dfeh.ca.gov



DFEH NUMBER

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

ADDRESS

PHONE

Community Development Properties

1221 2nd Ave., #500 Seattle, WA 98101

Community Development Properties:

Risk Management Unit

700 W. Main St. Alhambra, CA 91801 (626) 943-3898

S.

AGENT FOR SERVICE

CT Corporation System (C0168406), Agent for Service for Community Development Properties **ADDRESS** 

111 Eight Ave., 13th Floor New York, NY 10011 PHONE



DFEH NUMBER	*
PROPERTY TYPE ADDRESS OCCURRE	WHERE VIOLATION NO. OF UNITS
Other	1
	- Allegation -
	espondents  My request for the two bedroom unit included my live-in-aide and my medical verification from my doctor but Respondents by Respondent denying my reasonable
	r penalty of perjury under the laws of the State of California that ledge, except as to matters stated on my information and belief,
SIGNATURE OF COMPLAINANT OR COMPLAI	NANT'S LEGAL REPRESENTATIVE: DATE:



DFEH NUMBER COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED Apartment 6



DFEH NUMBER

- Allegation -	
I ALLEGE THAT I EXPERIENCED	
Discrimination ON OR BEFORE	
May 1, 2017	
BECAUSE OF MY ACTUAL OR PERCEIVED	
Disability (physical or mental)	
AS A RESULT, I WAS SUBJECTED TO	
Denied reasonable accommodation for a disability or medical condition	
On or about May 1 2017 to current, we were depict a reconstitution of the current ways	
On or about May 1 2017 to current, we were denied a reasonable accommodation/interactive process while residing in our four-bedroom unit located at the address where the violation occurred. The subject property	fu.
owned by and managed by The subject property has six units. My rei	i5 stal
amount is \$1600.00.	itai
On as about Many 4 20147 I made a second la	
On or about May 1 2017, I made a reasonable accommodation request to for a disabled parking space. However, to date, has not responded thus denying the reasonable accommodation requests.	ng
space. However, to date, has not responded thus denying the reasonable accommodation re failed to engage in an interactive process.	quest.
This is a violation of Government Code, Section 12955, Subdivision (a) and Civil Code 51.	
SIGNED UNDER PENALTY OF PERJURY	
By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California	that
the foregoing is true and correct of my own knowledge, except as to matters stated on my information and h	elief.
and as to those matters I believe them to be true.	
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	ATE:
31.2/10	
3/7/10	
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	ATE:
3/2//8	
The state of the s	Limber

#### Housing Discrimination Complaint

DFEH Matter
Date Filed: May 9, 2017

- 2. Complainant Representatives:
- 3. Other Aggrieved Parties:



- 4. The following is alleged to have occurred or is about to occur:
  - · Discriminatory refusal to rent
  - Discriminatory terms, conditions, privileges, or services and facilities
  - Discriminatory acts under Section 818 (coercion, Etc.)
  - · Failure to make reasonable accommodation
- 5. The alleged violation occurred because of:
  - Handicap
  - Retaliation

6.	Address and location of the property in question (or if no property is involved, the city and state where the discrimination occurred):
7.	Respondents:
8.	The following is a brief and concise statement of the facts regarding the alleged violation:
	The Complainants are who is disabled as defined by the federal Fair Housing Act, and her adult son, The Respondent is (Owner).
	The Complainants moved to the subject property on 01/13/2016. On 10/13/2016, the Respondent notified Complainant that pets were not allowed at the subject property as per the terms of her lease, so on 10/19/2016, she submitted a reasonable accommodation request, along with supporting medical documentation, explaining that her two small dogs were not pets her support animals. Complainant received no response to this request until 11/22/2016, when the Respondent issued a 90-day notice of termination of tenancy, which was followed up by a verbal eviction notice on 12/05/2016, and again on 02/09/2017 with a text message 90-day notice. After contacting a legal aid group, who sent the Respondents two letters regarding the notices of intent to evict, and the appearance that these actions were retaliatory for the exercise of fair housing rights, on 03/06/2017, the Respondent announced a \$125 rent increase, which Complainant alleges is further retaliation for the exercise of her fair housing rights through the reasonable accommodation request. Finally, Complainant alleges that since submitting her original reasonable accommodation request on 10/19/2016, the Respondent has refused to fulfill any of her repair requests.
9.	The most recent date on which the alleged discrimination occurred:

March 06, 2017, and is continuing.

#### 10. Types of Federal Funding Identified:

Section 8 Assisted, Tenant Based

11. The acts alleged in this complaint, if proven, may constitute a violation of the following sections:

804a or f, 804b or f, 818, and 804f3B of Title VIII of the Civil Rights Act of 1968 as amended by the Fair Housing Act of 1988.

Please sign and date	this	form
----------------------	------	------

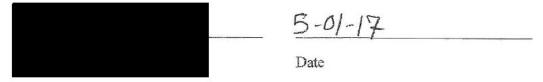
I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

05-01-17	-
Date	

N O T E: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.

Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.



N O T E: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.

### Housing Discrimination Complaint

Case N	DFEH Matter  Date Filed: March 9, 2017
1.	Complainants:
2.	Complainant Representatives:
3.	Other Aggrieved Parties:
4.	<ul> <li>The following is alleged to have occurred or is about to occur:</li> <li>Discriminatory advertising, statements and notices</li> <li>Discriminatory refusal to rent</li> <li>Discriminatory terms, conditions, privileges, or services and facilities</li> <li>Discriminatory acts under Section 818 (coercion, Etc.)</li> </ul>
5.	The alleged violation occurred because of: <ul> <li>Handicap</li> <li>Retaliation</li> </ul>
6.	Address and location of the property in question (or if no property is involved, the city and state where the discrimination occurred):

#### 7. Respondents:

8. The following is a brief and concise statement of the facts regarding the alleged violation:

The Complainant is who is disabled as defined by the federal Fair Housing Act. The Respondent is (Owner).

The Complainant resided at the subject property for approx. a year, during which time her rent was paid by the Regional Center of the East Bay, an organization which provides support to individuals with developmental disabilities.

The Complainant alleges that as the Respondent was aware of the Complainant's disability (through the rental arrangement described above), the Respondent took advantage of the Complainant throughout her tenancy. The Complainant alleges that she discovered the studio she rented, which was behind the main house, was illegal, and that she was deprived of heat and often electricity. As the Respondent refused to address this, and in fact blamed the Complainant for the electrical issues, the Complainant was intimidated into moving out, which she did on 12/23/2016, following threats from the Respondent. Following the Complainant's move out, the Respondent has refused to refund her security deposit,

The Complainant also alleges that she was subjected to different terms and conditions during her tenancy, as on at least two occasions the Respondent hosted yard sales, and allowed every resident of the subject property to sell belongings at the yard sale, but forbid the Complainant from doing the same.

Finally, the Complainant alleges that despite the Respondent's awareness of her disability and the impact it played in her inability to work, and despite the fact that rent was always paid in full, the Respondent would regularly criticize the Complainant for not working, telling her that her volunteer efforts were not enough, and beginning in or around the end of 11/2016, the Respondent began telling the Complainant that if she did not get a job she could no longer live there.

9. The most recent date on which the alleged discrimination occurred:

December 23, 2016

- 10. Types of Federal Funding Identified:
- 11. The acts alleged in this complaint, if proven, may constitute a violation of the following sections:

804c, 804a or f, 804b or f, and 818 of Title VIII of the Civil Rights Act of 1968 as amended by the Fair Housing Act of 1988.

Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

2-8-17 Date

N O T E: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.

DEPT 07 -9 PM --



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

January 5, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

Casa Monterey LTD et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Mario Anzaldua Associate Governmental Program Analyst 916-585-8153 mario.anzaldua@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

Casa Monterey LTD

P.O. Box 29890 Anahiem, CA 92809

FDC Management, Inc.

135 S. Chaparral Court, Suite 200 Anaheim Hills, California 92808



**ADDRESS** 

PHONE

Agent for Service for Casa Monterey LTD

135 South Chaparral Ct., #200 Anaheim, CA 92808

Agent for Service, Agent for Service for FDC Management, Inc.

135 S. Chaparral Court, Suite 200 Anaheim Hills, CA 92808



protected class.

### COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DFEH NUMBER PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED Apartment 120 - Allegation 1 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE August 15, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO Denied reasonable accommodation for a disability or medical condition PARTICULARS I requested a reasonable accommodation many times from Respondent to put us in a hotel for the day because the fumes that were coming from the unit downstairs which had renovation made it difficult for us to breathe due to our disability. My wife and I have a disability. Respondent was aware of my disability but still denied my request. On August 23, 2017, I requested another reasonable accommodation for the same ignored and denied my request. I believe I was discriminated and denied a matter and Respondent reasonable accommodation based on my disability. - Allegation 2 -I ALLEGE THAT I EXPERIENCED Retaliation ON OR BEFORE August 13, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Reported or resisted any form of discrimination or harassment AS A RESULT, I WAS SUBJECTED TO Evicted PARTICULARS On July 13, 2017, I told Respondent that I was going to file a complaint with the Department of Fair Employment and Housing because I was harassed and discriminated due to my association with a member of a protected class. Respondent started treating me differently after I told her about this. For example, she became belligerent about everything. She called the police alleging that I threatened property's groundskeeper. Respondent threatened to evict me, and ended up serving me with an Unlawful Detainer Notice knowing that I always paid my rent on time. Respondent has made it difficult for me and my family to enjoy our living environment. As of this time, I am going through a court hearing with her.

I believe I was being evicted, retaliated, harassed, and discriminated based on my association with a member of a



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#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:



#### **DEPARTMENT OF FAIR EMPLOYMENT & HOUSING**

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

May 7, 2018



RE: Request to Approve Complaint

DFEH Number:

Ladera WNG II, LLC, et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at karina.arabolaza@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely.

Karina Arabolaza Consultant II 213-337-4520

karina.arabolaza@dfeh.ca.gov



Apartment

### COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

**DFEH NUMBER** COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE Ladera WNG II, LLC, c/o Rancho PO Box 9 Mission Viejo San Juan Capistrano, CA 92693-0009 Western National Property 8 Executive Circle (949) 862-6200 Management Irvine, CA 92614 PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED

221



#### **DFEH NUMBER**

#### - Allegation 1 -

#### I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

February 6, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental); Other: Engagement in a Protected Activity

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

In February 2016, Western National Property Management conducted an inspection of my unit during which management became aware that I had a cat/s. Subsequently, on or around April 2016, I made a reasonable accommodation request to have my cat/s as my emotional support animal. Since then, anytime management conducted an inspection of my unit or whenever management staff changed and my cat/s were singled out, I was required to re-submit my reasonable accommodation request, including medical verification, on the basis that I had used incorrect or out of date forms.

Between January and April 2017, I had to reiterate my reasonable accommodation request for my service animal/s. I also made additional reasonable accommodation requests to have more time to address my storage needs, more time to prepare for inspections and to communicate with me via email. Management denied all of my reasonable accommodation requests.

On or around July 2017, with the assistance of the Orange County Fair Housing Council, I sent a letter to management to cease their harassment of unreasonable inspections and denial of my reasonable accommodation requests. Management simply responded that they would consult with an attorney.

- Allegation 2 -

#### I ALLEGE THAT I EXPERIENCED

Retaliation

ON OR BEFORE

February 6, 2018

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Requested or used a disability-related accommodation

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

Since April 2017, in retaliation for making reasonable accommodation requests due to my Disability (on file with DFEH) and my engagement in a protected activity, management increased the number of inspections to my unit and garage.



#### DFEH NUMBER

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED

Retaliation

ON OR BEFORE

February 6, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Requested or used a disability-related accommodation

AS A RESULT, I WAS SUBJECTED TO

Evicted

**PARTICULARS** 

On or around September 2017, in retaliation for making reasonable accommodation requests due to my Disability (on file with DFEH) and my engagement in a protected activity, management issued me a notice of non-renewal and termination of tenancy. The reasons given indicated that I was using my garage as storage space, I had unauthorized animals and that my reasonable accommodation requests were not properly addressed (no clear connection with my disability).

- Allegation 4 -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

February 6, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental); National Origin (includes language restrictions)

AS A RESULT, I WAS SUBJECTED TO

Denied equal terms and conditions

#### **PARTICULARS**

During my tenancy, I rented from management additional storage space, which I was granted for an additional fee of \$125. I later learned that another resident who was also disabled and Hispanic and I were the only ones charged additional fees for storage space and were subjected to numerous inspections when management changed the terms and conditions of allowing residents to use garage space for storage. Management subjected me to different terms and conditions due to my Disability and my National Origin charging me additional fees and conducting numerous inspections.



#### **DFEH NUMBER**

- Allegation 5 -

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
February 6, 2018
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
PARTICULARS

Since July 2017, after I made several reasonable accommodation requests, management increased the number of inspections of my unit and storage space, including my garage. Management, however, denied my reasonable accommodation requests and fully aware that without the accommodations I would not be able to comply with the inspections, intentionally harassed me with numerous inspections.

## SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE: DATE:

May 14, 2018



STATE OF CALIFORNIA I Department of Fair Employment and Housing

## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

HUD NUMBER

COMPLAINANT(S)

**ADDRESS** 

PHONE

OTHER AGGRIEVED PARTIES

TYPE OF DISCRIMINATION AND LAW General - 12955 (a), (c) and (f)

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME

+=:

RESPONDENT

Oceanside Gardens Limited Partnership

**ADDRESS** 

PHONE

3533 Empleo Street San Luis Obispo, CA 93401

ADDRESS

3533 Empleo Street

AGENT FOR SERVICE

c/o Oceanside Gardens Limited Partnership

Property Manager, The Duncan Group

Maintenance Technician, The Duncan Group

Social Worker, Peoples' Self-Help Housing

PHONE

San Luis Obispo, CA 93401

CO-RESPONDENT(S)."

The Duncan Group

**ADDRESS** 

PHONE

3533 Empleo Street

(805) 781-3088

San Luis Obispo, CA 93401

'ADDRESS

PHONE

3533 Empleo Street San Luis Obispo, CA 93401

AGENT FOR SERVICE

CO-RESPONDENT(S)

CO-RESPONDENT(S)

CO-RESPONDENT(S)

AGENT FOR SERVICE

CO-RESPONDENT(S)

Peoples' Self-Help Housing

c/o Peoples' Self-Help Housing

c/o The Duncan Group

ADDRESS

PHONE

2612 Elm Ave.

(805) 772-9759

Morro Bay, CA 93442

ADDRESS

PHONE

2612 Elm Ave.

(805) 772-9759

Morro Bay, CA 93442

**ADDRESS** 

PHONE

3533 Empleo Street

(805) 781-3088

San Luis Obispo, CA 93401

ADDRESS

PHONE

3533 Empleo Street

San Luis Obispo, CA 93401

ADDRESS

PHONE

2612 Elm Ave.

(805) 772-2419

Morro Bay, CA 93442

RECEIVED

DEC 0 4 2017

FORM REV 7/2015

Page 1

Department of Feir Employment & Housing 5tk Grove



DEER WHIRED	**	HUD NUMBER
PROPERTY TYPE Apartment	ADDRESS WHERE VIOLATION OCCURED	NO. OF UNITS 21
I ALLEGE THAT I EXPERIENCED	Discrimination, Harassment	ů.
ON OR BEFORE	July 16, 2017	
BECAUSE OF MY ACTUAL OR PERCEIVED	Race, Ancestry, Association with a member of a protected class, Disability [physical/mental]	
AS A RESULT, I WAS	Denied equal terms and conditions, Denied reasonable accommodation, Subjected to restrictive rule/covenant, Subjected to discriminatory statements/advertisements, Harassed	
STATEMENT OF FACTS		
The property har managed in partnership by The Duncar manager maintenance maintenance.  II. I was denied a reasonable accommoda statements/advertisements and subject American], Association with a member	d harassed at the subject property located at s 21 units, is owned by Oceanside Gardens Limit in Group and Peoples' Self-Help Housing, which extechnician and resident social work ation and equal terms and conditions, subjected to restrictive rule/covenant due to my Race, of a protected class and Disability [physical/ment a), (c) and (f). My belief is based on the following	employs property ter  discriminatory Ancestry [Native tal], which are violations
not allowed to park in my assigned park considerable distance from my unit and original spot was closer to my unit and Respondents basis. Respondent went as fa she lived at another apartment complex Occasionally, I would use the handicap my truck. When Respondent park there [illegally, since she does not using handicap parking. Additionally, or assist with resources that could help expendent or the park there is the sources of the could help expendent or the park there is the course of the could help expendent or the park there is the course of the course	leak from my truck, I was advised by Respondenting spot. Thereafter, I was subjected to park on the difficult for me since I use a cane due to my disal asked for a reasonable accommodation to keep took turns parking in my assigned partial areas parking her car in my assigned parking spot to ensure that I would not have access to my parking spot located on the premises, only when noticed I was using the handicap parking spot, she have a handicap placard visible] as to also prevently when further pressure was put on, did Responsed to the premise of the premise of the prevently when further pressure was put on, did Responsed to the premise of the premise of the prevently when further pressure was put on, did Responsed to the premise of the premise o	the street which was a ability [physical]. My parking inside. I have been spot on a daily covernight, even though arking spot. I loading and unloading the made it a point to the ent me from further and the seven months,

b. On or about August 8th and 23rd, 2016, during routine apartment inspections, on two separate occasions, Respondent made discriminatory statements directed at me, including "I wouldn't know, I am not

Indian" [due to my Native America ancestry] and calling me "taco man" [I have a Hispanic surname].



DFEH	NUMBER		a di				HUD NUME	BER
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rep acc	mail. I reporte airs. It took or cess to my ma	ed this to Resp ver two weeks	ondent to get my mai at the delay in	who then had box repaired an addressing my	as result I was u ad Respondent nd to get my nev service request	ma w key, in the me	ake the appro antime I had	priate
Su	nday, July 16, ait for Respor	2017 to condu	uct an exhaus arrival;	t fan repair. I ac the respondent	my dwelling from commodated the never arrived. I her harass and i	e request and so believe that this	tayed home to service orde	on o rwas
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Signa	ature of Comp	lainant or Com	nplainant's Leg	gal Representa	tive:		Date:	
							11/2	4/1-
Print	ed Name				*		11/2	1 2



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

DIRECTOR KEVIN KISH

2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758. 800-884-1684 I TDD 800-700-2320 www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

November 20, 2017	
	Email:

RE: Notice of Complaint	
DFEH Number:	
Oceanside Gardens	Limited Partnership

Dear	
Dear	

This notice confirms that you have filed a housing inquiry and have been interviewed by a Department of Fair Employment and Housing representative. You must approve, sign and return the complaint before it can be investigated. If you do not approve the language on the complaint, please do not sign the complaint; instead, contact me to discuss your concerns. If you do not return the signed complaint within 10 days, your inquiry will be closed and no further action will be taken.

Please return the signed complaint using the Adobe EchoSign electronic signature. If you need further assistance, please feel free to contact the toll free telephone number at (800) 884-1684 with any questions you may have.

Please note that the information you provided is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Carla Rubalcava Associate Governmental Program Analyst 916-585-8143 carla.rubalcava@dfeh.ca.gov

RECEIVED

DEC 0 4 2017

Department of Fair Employment & Housing Elk Grove



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE



## TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

29SC Sycamore LP

4251 23rd Street

(916) 366-6060

San Francisco, CA 94114

Dick James & Associates, Inc.

2260 Park Towne Circle, Ste. 204

(916) 332-7430

Sacramento, CA 95825

RW Zukin Corp.

4080 Campbell Ave. Menlo Park, CA 94025 (650) 328-5050

AGENT FOR SERVICE

**ADDRESS** 

PHONE

Capitol Corporate Services, Inc., Agent for Service for 29SC Sycamore LP Po Box 1831 Austin, TX 78767

Agent for Service for Dick James & Associates, Inc.

2260 Park Towne Circle, Ste. 204 Sacramento, CA 95825

Agent for Service for RW Zukin Corp.

4080 Campbell Ave. Menlo Park, CA 94025

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

UCCURR

Apartment

120



DFEH NUMBER

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
September 1, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

was discriminated against and denied reasonable accommodation for a disability or medical condition at the subject property.

The subject property is an apartment complex with approximately 120 units. The complex is owned by 29SC Sycamore, LP and has been managed by Dick James & Associates, Inc. and RW Zukin Corp.

On or about 2017, due to my physical disability, I submitted a reasonable modification to management requesting that a shower handle be installed in my shower. Management denied this request.

On or about 2017, due to my physical disability, I submitted a reasonable accommodation to management requesting that my front door's security door be installed properly. The security door in my unit seems to have been installed backwards and due to my physical disability, it makes it very difficult for me to open the door.

On or about September 2017, due to my physical disability, I submitted a reasonable accommodation to management requesting a nearby handicapped parking space. Management denied this request.

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
May 1, 2018
BECAUSE OF MY ACTUAL OR PERCEIVED
Race; Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO
Denied equal terms and conditions
PARTICULARS

We were discriminated against and denied equal terms and conditions at the subject property

The subject property is an apartment complex with approximately 120 units. The complex is owned by 29SC Sycamore, LP and has been managed by Dick James & Associates, Inc. and RW Zukin Corp.

On or about September 2017, we submitted service requests for the collapsing kitchen sink, mold in the bathroom and bathroom countertops. Our service requests were ignored.



### DFEH NUMBER

On or about December 2017, we requested keys to the complex's walk-in gate and pool, but our request was denied.

On or about late-February 2018, we again submitted service requests for the collapsing kitchen sink, mold in the bathroom and bathroom countertops. Our service requests were ignored.

On or about early May, 2018, we received a 60-day notice to vacate.

We believe we are being discriminated and are being denied equal terms and conditions due to our race (African-American) and past reasonable accommodation requests. We have personal knowledge that other tenants are receiving these services.

## SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	05/19/18
SIGNATURE OF CO-COMPLAINANT OR CO-COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	05.19.18

RECEIVED

MAY 2 3 2018

Page 3 of 3



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email; contact.center@dfeh.ca.gov

January 31, 2018



		_

RE: Request to Approve Amended Complaint

DFEH Number:
HUD Number:
et al.

Dear

We have amended your complaint based on the changes you requested. Please read the proposed amended complaint carefully. If you do not approve of the language on the complaint, do not sign it; instead, contact me within ten (10) calendar days to discuss your concerns. If you agree with the language, please sign and return the amended complaint as soon as possible. We must receive the signed complaint before it can be investigated. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at deborahf.brown@dfeh.ca.gov or by fax to 1-888-519-5917.

Please note the information you provide is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq. Thank you for your cooperation.

Sincerely,

Deborah F. Brown Consultant III (Specialist) 916-585-7085 deborahf.brown@dfeh.ca.gov



DFEH NUMBER		HUD NUMBER
COMPLAINANT	ADDRESS	PHONE
	TYPE OF	DISCRIMINATION AND LAW
		Government Code § 12955 Civil Code § 51, et seq.
NAMED IS THE EMPLOYER, PER	RSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY V	VHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS
Apartment		21

- Allegation -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
December 31, 2016
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

a. On or around December 2016, I made two reasonable accommodation requests to Respondent I informed management that I needed a disabled parking space. I also informed them that I, and other disabled tenants at the property, needed access to the main gate because the paving was uneven and there was a ledge blocking the disabled tenants from getting access to the gate.

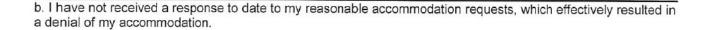
File Date: December 18, 2017

Amended



## **DFEH NUMBER**

HUD NUMBER



### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

## SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

{{Dte\_es\_:signer1: date}}



DFEH NUMBER

**HUD NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

**OTHER AGGRIEVED PARTIES** 

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)	ADDRESS	PHONE
Building Better Neighborhoods, Inc.	1076 North State Street Ukiah, CA 95482	7074635462
Manager	1076 North State Street Ukiah, CA 95482	7074635462
Housing Manager	1076 North Street Ukiah, CA 95482	7074635462
	1076 North State Street Ukiah, CA 95482	7074635462
Community Development Commission of Mendocino County	1076 North State Street Ukiah, California 95482	7074635462

PROPERTY TYPE

ADDRESS WHERE VIOLATION **OCCURRED** 

NO. OF UNITS

Apartment

10

- Allegation -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE April 19, 2017

File Date: June 2, 2017 Amended

RECEIVED

FEB 9 2018

Page 1 of 3

Department or cair Employment & Housing Elk Grove



o care	*	熱
DFEH NUMBER		HUD NUMBER

## BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

Complainants are and her eleven year old son. Respondents are Manager), (Housing Manager), Community Development Commission of Mendocino County (Operator), and Building Better Neighborhoods, Inc. (Owner). Complainant and Complainant's son are disabled as defined by the federal Fair Housing Act. Complainant's son requires the assistance of a health aide throughout the day and night. Complainant has a visual processing disability.

In 2014 Complainant informed Respondent complex that her son was severely disabled and made three requests for accommodations for his disability. She provided medical verification for the requests from the son's therapist. Complainant alleges the request was effectively denied by Respondents due to the preconditions placed on approving the request.

Complainant recently re-submitted the three accommodation requests with supporting documentation from her son's therapist for each. They were:

- I . That Complainant's adult son, who is a prior resident of the household and medically trained, move back into the home as a health aide;
- 2. Complainants be able to move into an apartment with an additional bedroom to enable Complainant's disabled son to have equipment in an exercise room; and,
- Complainant's disabled son be able to get a young service dog, which Complainant's therapist recommended be a puppy to assist Complainant's son to bond with the dog.

On March 9, 2017 Respondent denied the request for a service dog until the Complainant could propose a specific older dog that already has all its adult shots, was neutered, and licensed. Respondent also refused to consider any specific dog until all conditions were met and required that the dog never be on the property until it was approved. These prerequisites require Complainant to invest in the animal without any guarantee it would be approved. Respondent further declined to consider the other two accommodation requests until Complainant was approved for the dog.

Respondent also submitted a demand for many details regarding Complainant son's disability with a four day deadline for submission. On or about March 12 -13, 2017, Complainant provided the requested details and resubmitted her accommodation requests, noting that there should be no delay in processing the requests for an additional bedroom or her adult son's move back into the household as a health aide.

Complainant did not hear back for more than five weeks until she received another denial of all accommodation requests on April 19, 2017, from Respondent

Accompanying the denial was a demand for another long list of information about the household and Complainant's son. Complainant notes that Respondent managers have known about her son's disability since 2014, and have repeatedly received medical verification of the connection between the disability and each of the three requests. On April 30, 2017, Respondents approved the request for Complainant's adult son to be a health aid, but denied the other two requests.

File Date: June 2, 2017

Amended

Page 2 of 3



**DFEH NUMBER** 

# AMENDED COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

SIGNED UNDER PENALTY OF PERJURY  By submitting this complaint I am declaring under penalty of perjury under the laws of the State of the foregoing is true and correct of my own knowledge, except as to matters stated on my information and as to those matters I believe them to be true.	
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:

File Date: June 2, 2017 Amended

Page 3 of 3

**HUD NUMBER** 

02-04-20,



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

April 16, 2018

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RE: Request to Approve Amended Complaint
DFEH Number:

Dear

We have amended your complaint to add the Unruh Civil Rights Act (Civil Code Section 51). Please read the proposed amended complaint carefully. If you agree with the language, please follow the Adobe EchoSign instructions to sign and return the amended complaint via email. If you do not approve of the language on the amended complaint, do not sign it; instead, contact me immediately at my direct telephone number or email address listed below my signature to discuss your concerns. We must receive the signed complaint before it can be investigated.

Please note the information you provide is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq. Thank you for your cooperation.

Sincerely,

Adele Cox

Adele Cox Associated Governmental Program Analyst (510) 789-1060 adele.cox@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

House

1



#### **DFEH NUMBER**

- Allegation 1 -
ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
September 30, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO  Denied reasonable accommodation for a disability or medical condition
PARTICULARS
From on or about September 8, 2017 to September 30, 2017, I was denied a reasonable
accommodation/interactive process while residing in a two-bedroom owner occupied house located at the subject address. The subject property is owned and managed by resides in the other bedroom in the house. My rental amount is \$800.
On September 18, 2017, I requested a reasonable accommodation for not enter my bedroom and a cock to be installed on my bedroom door. I explained to that I have medical, documented diagnosis for the commodation of the room whenever I want", thus denying my reasonable accommodation. In addition, realled to engage in an interactive process.
This is a violation of Government Code, Section 12955, Subdivision (a) and Civil Code 51.

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
September 23, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
PARTICULARS

From on or about September 8, 2017 to September 30, 2017, I experienced harassment from believe I experienced harassment because of my disability (mental).

From on or about September 8, 2017 to September 30, 2017, whenever I interacted with she would shout, swear, and make derogatory comments (details on file with DFEH) although I notified her this exacerbates my disability. The yelling, swearing and derogatory comments created a hostile living environment.

This is violation of Government Code 12955, Subdivision (a) and (c).

File Date: February 7, 2018

Amended



**DFEH NUMBER** 

## - Allegation 3 -I ALLEGE THAT I EXPERIENCED Retaliation ON OR BEFORE September 30, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Requested or used a disability-related accommodation AS A RESULT, I WAS SUBJECTED TO Evicted **PARTICULARS** On September 18, 2017, I informed of my disability (mental), and requested reasonable accommodation. On September 21, 2017, I informed I would be moving out. On September 23, 2017, I returned to the subject property to collect my personal belongings, and found the house lock had been changed. I did not receive an explanation or notice to vacate. I believe the lock had been changed in retaliation for my request for reasonable accommodation. In addition, in retaliation, did not return my deposit and instead charged me for storage of my personal belongings when I attempted to pick up my items on September 23, 2017.

This is a violation Government Code, Section 12955, Subdivision (f).

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMP	AINANT OR COMP	AINANT'S LEGAL	REPRESENTATIVE:
SIGNATORE OF COME	-AINANI ON COME	LAINANI O LEGAL	REFRESEINIATIVE:

DATE:

Apr 16, 2018

File Date: February 7, 2018

Amended



DEEH NUMBER		8 3	HUD NUMBER
COMPLAINANT(S)	ADDRESS	18	PHONE
	,		
	*		9 8
			( <del>*</del> )
OTHER AGGRIEVED PARTIES			CRIMINATION AND LAW General - 12955 a
NAMED IS THE EMPLOYER, PERSON, AGENCY, OR	GANIZATION OR GOVERNMEN	T ENTITY WHO DISCRII	MINATED AGAINST ME
RESPONDENT	ADDRESS	100	PHONE
AGENT FOR SERVICE	ADDRESS		PHONE
er N		142	

RECEIVED

NOV 27 2017

Department of Fair Employment & Hotaling
Elk Grove



DEEH MILMRER

## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DEEH MIMRER	*	HUD NUMBER
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURED	NO, OF UNITS
Trailer Space or Mobile Home		60
ALLEGE THAT I EXPERIENCED	Discrimination, Retaliation	
ON OR BEFORE	June 16, 2017	
BECAUSE OF MY ACTUAL OR PERCEIVED	Disability - [physical or mental], Engagement in protected activity	**
AS A RESULT, I WAS	Denied equal terms and conditions, Denied reasonable accommodation, Evicted	
STATEMENT OF FACTS	tototototototototototototototototototo	
<ol> <li>From March 25, 2017 to June 16, 2</li> </ol>	2017, I was denied a reasonable accommodation, retalia	ated against and
denied equal terms and conditions while	e residing in my 2-bedroom mobile home located at	
	s 60 units and is owned by	aged by
My rental amount is \$470.		

- II. I believe that I was denied a reasonable accommodation (emotional support animal), denied equal terms and conditions, and evicted in retaliation due to my disability (mental) and engagement in a protected activity (reasonable accommodation request). This is a violation of Government Code section 12955(a) and (f). My belief is based on the following:
- A. On March 25, 2017, I was denied a reasonable accommodation request and subjected to differential treatment when I was served with a 7 day notice to comply with park rules due to my emotional support animal not being on a leash. In addition, the notice stated I needed pre-approval for my emotional support animal. I have witnessed other tenants, who are not disabled, be allowed to have their pets unleashed and not be served the same notice to comply.
- B. On April 16, 2017, I was served with a 60 day notice to vacate as a result of a second complaint about my emotional support animal not being on a leash. I believe the notice was served in retaliation for me not getting rid of my emotional support animal which I need in order to support my mental disability.
- C. On June 16, 2017, I moved out of the mobile home park as a result of me not being allowed to keep my emotional support animal.



DFEH NUMBER

HUD NUMBER

SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

Signature of Complainant or Complainant's Letal Representative:	Date:
	11/2//17
Printed Na	77
	4



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 800-884-1684 | TDD 800-700-2320 www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

DIRECTOR KEVIN KISH

November 17, 2017



KEEP FOR YOUR RECORDS

RE: Request to Approve Complaint

DFEH Matter Number:

Dear

This notice confirms that you have filed an inquiry and have been interviewed by a Department of Fair Employment and Housing (DFEH) representative. You must approve, sign and return the complaint before it can be investigated. If you do not approve the language on the complaint, please do not sign the complaint, instead, contact me to discuss your concerns.

Please return the signed complaint by mail to DFEH, 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758 or by email to the email address below or by fax to 888•519•5917. If you do not return the signed complaint within 10 days, your inquiry will be closed and no further action will be taken.

If your pre-complaint inquiry is closed and you would like to appeal the decision, you may submit a written request within 10 days of the closure date to DFEH, District Administrator Colleen Janatpour, 2218 Kausen Drive, Suite 100 Elk Grove, CA or Colleen Janatpour@dfeh.ca.gov or call (510)789-1040.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely.

Cauceta Nava

Lareeceia Harris Staff Services Analyst 510-789-1051 lareeceia.harris@dfeh.ca.gov RECEIVED

NOV 27 2017

Department of Fair Employment & Housing

Elk Grove



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

February 14, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

Camden Main And Jamboree et al.

Dear I

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via Echosign. If you do not approve of the language on the complaint, do not sign it; instead, contact me at my direct telephone number listed below my signature to discuss your concerns.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Ericka Njemanze Ericka Njemanze Sff Services Analyst 510-789-1047 ericka.njemanze@dfeh.ca.gov



## **DFEH NUMBER**

COMPLAINANT

## ADDRESS

PHONE

## TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, A	GENCY, ORGANIZATION OR GOVERNMENT	ENTTITY WHO DISCRIMINATED AGAINST ME			
RECRONDENT/O					
RESPONDENT(S)	ADDRESS	PHONE			
Camden Main And Jamboree	2801 Main Street Irvine, California 92614	866-647-3293			
	Office 2801 Main Street Irvine, California 92614	949-833-7900			
<u>;</u>	Office 2801 Main Street Irviine, California 92614	949-833-7900			
	Office 2801 Main Street Irvine, California 92614	949-833-7900			
	2801 Main Street Irvine, CA 92614	866-647-3293			
John Thorpe Successor Trust	601 W. 5th Street, Ste. 800 Los Angeles, CA 90071-2009	213-680-9940			
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS			
Apartment		292			



#### DFEH NUMBER

- Allegation 1 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE November 1, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO Denied reasonable accommodation for a disability or medical condition **PARTICULARS** From January 12, 2017 to November 1, 2017, I was denied a reasonable accommodation for a closer parking space while residing in my 2 bedroom unit located at The monthly rent was \$1595 and there are 292 units. The subject property is owned by John G. Thorpe Successor Trust and managed by Camden aka Camden Main & Jamboree and the their employees, and Senior Vise President of Camden Main & Jamboree, From January 12, 2017 to November 1, 2017, I made a reasonable accommodation request for a closer parking space to my unit due to my physical disability. This request was made at least once or twice a month. The assistant manager, said they were not going to help me thus denying my reasonable accommodation, which exacerbated my disability and there was no interactive process.

This is a violation of Government Code, Section 12955, Subdivision (a) and Unruh Civil Code 51.

- Allegation 2 -

## I ALLEGE THAT I EXPERIENCED

Retaliation

ON OR BEFORE

July 27, 2017

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Requested or used a disability-related accommodation

AS A RESULT, I WAS SUBJECTED TO

Denied equal terms and conditions

## **PARTICULARS**

From January 12, 2017 to July 2017, I made a reasonable accommodation request for closer parking spot at least once or twice a month and on July 27, 2017, in retaliation management served me with a violation notice for leaving a stroller outside of my unit. However, I am aware of other tenants who have left items outside of their units and management did not serve these tenants with a similar violation notice.

This a violation of Government Code, Section 12955, Subdivision (a) and (f) and Unruh Civil Code 51

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
October 13, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED



#### **DFEH NUMBER**

# PARTICULARS On August 5, 2017, August 24, 2017 and September 3, 2017, Respondent, due to my national origin, which created a hostile living environment. On August 24, 2017, I reported the visual harassment to the Senior Vice President of Camden, to no avail. On September 21, 2017, Respondent, made the following verbal harassing comment, "I am going to hurt you and your family", which I believe is due to our national origin. On October 13, 2017, I had to file a restraining order due to the continued visual and verbal harassment. This is a violation of Government Code, Section 12955, Subdivision (a).

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
October 24, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED

#### **PARTICULARS**

On October 23, 2017, Respondent, made the following derogatory comment, "Move out you Muslim Terrorist". This derogatory comment created a hostile living environment.

- Allegation 4 -

On October 24, 2017, my neighbor made a derogatory comment to me based on his perception of my religion (details on file with DFEH). I sent a complaint through the management website to no avail.

This is a violation of Government Code, Section 12955, Subdivision (a).

- Allegation 5 -

### I ALLEGE THAT I EXPERIENCED

Retaliation

## ON OR BEFORE

November 20, 2017

## **BECAUSE OF MY ACTUAL OR PERCEIVED**

Reported or resisted any form of discrimination or harassment

AS A RESULT, I WAS SUBJECTED TO

Evicted

#### **PARTICULARS**

On November 3, 2017, Respondents failed to accept my rent in retaliation and on November 17, 2017, served me with a retaliatory eviction for reporting harassment based on my national origin, for opposing harassment due to Respondent's perception of my religion and for making a reasonable accommodation once or twice a month starting January 2017. We vacated our unit on November 20, 2017.

This is a violation of Government Code, Section 12955, Subdivision (f) and Civil Code 51.



### **DFEH NUMBER**

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Feb 20, 2018 {{Dte\_es\_:signer1: date}}



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 14, 2018





RE: Request to Approve Complaint
DFEH Number:

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Ericka Njemanze

Ericka Njemanze Staff Services Analyst (510) 789-1047 ericka.njemanze@dfeh.ca.gov



**DFEH NUMBER** COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED Apartment 4



**DFEH NUMBER** 

- Allegation 1 -

# I ALLEGE THAT I EXPERIENCED Discrimination

ON OR BEFORE

July 16, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Marital status

AS A RESULT, I WAS SUBJECTED TO

Subjected to discriminatory statements/advertisement

**PARTICULARS** 

On July 16, 2017, we were subjected to a discriminatory inquiry at the subject property where the violation occurred, which is a 2-bedroom unit. There are 4 units and our rental amount was \$2145. The subject property is owned and managed by

On July 19, 2017, we met with Respondent, and during this meeting he asked if we were married.

This is a violation of Government Code, Section 12955, Subdivision (b) and Civil Code 51.

- Allegation 2 -

#### I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

November 30, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Familial status (Children)

AS A RESULT, I WAS SUBJECTED TO

Subjected to restrictive rule/covenant

**PARTICULARS** 

From July 16, 2017 to November 30, 2018, we were subjected to overly restrictive rules. On July 16, 2017, when we met with the stated that our child was not allowed to play outside and because of this comment, we did not allow our child to play outside during our tenancy.

This is a violation of Government Code Section 12955, Subdivision (a) and Civil Code 51.



**DFEH NUMBER** 

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
November 30, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED

## **PARTICULARS**

From July 16, 2017 to November 30, 2017, we were subjected to harassment based on our disability (mental) and race (African-American).

became loud and yelled at was aware that this statement wou	aware of Complainant, came to our unit regarding a repair. During this visit, starting, "Well why don't you go ahead and hit me!" all disability and therefore, we believe this lisability, which created a hostile living environment.
From July 16, 2017 to November 30, 201 several verbal barassing statements when	7, during our tenancy Respondent, make made

This is violation of Government Code Section 12955, Subdivision (a).

on our race, which created a hostile living environment.



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- Allegation 4 -  I ALLEGE THAT I EXPERIENCED  Discrimination  ON OR BEFORE  November 30, 2017  BECAUSE OF MY ACTUAL OR PERCEIVED  Disability (physical or mental);Race  AS A RESULT, I WAS SUBJECTED TO  Evicted  PARTICULARS  On October 4, 2017, we were served with an eviction and vacated on November 3 believe is based on our disability (mental) and race (African-American).	30, 2017, which we
On October 4, 2017, served us with an eviction notice. On October attended an unlawful detainer and was forced out on November 30, 2017. We be due to disability because attempted to trigger his disability discriminatory/harassing statements during our tenancy. In addition, we believe the motivated because made several statements referring to us as, "you per tenancy.	lieve we were evicted by making ne eviction is racially
This is violation of Government Code Section 12955, Subdivision (a) and Civil Cod	de 51.
SIGNED UNDER PENALTY OF PERJURY  By submitting this complaint I am declaring under penalty of perjury under the law California that the foregoing is true and correct of my own knowledge, except as to my information and belief, and as to those matters I believe them to be true.	
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	Mar 14, 2018
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE: DATE:	
	Mar 14, 2018



## DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

May 9, 2018

Via Email

RE: Request to Approve Complaint

DFEH Number:

MidPen Housing Corporation et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My information is below.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Ericka Njemanze

Ericka Njemanze Staff Services Analyst (510) 789-1047 ericka.njemanze@dfeh.ca.gov



## **DFEH NUMBER**

COMPLAINANT ADDRESS PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S) ADDRESS PHONE

MidPen Housing Corporation 303 Vintage Park Drive, Ste. 250 650-356-2900

Foster City, CA 94404

MP San Mateo Transit Associates, 303 Vintage Park, Ste. 250 Foster City, CA 94404

AGENT FOR SERVICE ADDRESS PHONE

Agent for 303 Vintage Park, Ste. 250
Service for MP San Mateo Transit Foster City, CA 94404

Associates, LP

Agent for 303 Vintage Park, Ste. 250
Service for MidPen Housing Foster City, CA 94404
Corporation

PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS

OCCURRED

Apartment 68



### **DFEH NUMBER**

- Allegation 1 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE December 1, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Race AS A RESULT, I WAS SUBJECTED TO Denied equal terms and conditions **PARTICULARS** From January 3, 2017 to December 1, 2017. I was subjected to differential treatment while residing in my 2bedroom unit located at The owner is MP San Mateo Transit Associates, LP and is managed by MidPen Housing Corporation and its employee 68 units and my rent was \$394 and the balance is paid by Section 8. I believe I was subjected to differential treatment due to my race (African-American). On January 3, 2017, I requested to reserve the community room in advance for a family function. However, for each date requested, I was denied. On January 7, 2017, which is the date I wanted to reserve the room, it was not being used by any other tenant. On January 14, 2017, a non-African-American tenant notified me that she recently reserved the community room on January 10, 2017, just four days prior to her event and she was approved. On March 1, 2017, I was verbally notified by the manager, that she called the police on my son claiming he fired a pellet gun. However, it is my understanding that there were several non-African-American children who were involved and did not call the police on these other children. asked if I get food stamps, stated I was lucky to be in a program that helped me with my rent, wanted to know how I could afford to feed my family, and asked if my children's father paid child support. does not ask these type of questions to non-African-American tenants. On October 1, 2017, called me and stated I needed to get written approval before having my carpets cleaned. However, I am aware of a non-African-American tenant who was not required to get written approval before having her carpets cleaned. On December 1, 2017. came outside and told my two children that they needed to remove their remote control cars from the premises. However, she did not state the same to the non-African-American children who were also playing with remote control cars.

This is a violation of Government Code Section 12955, Subdivision (a) and Civil Code 51.



## **DFEH NUMBER**

- Allegation 2 -	
I ALLEGE THAT I EXPERIENCED	
Discrimination	
ON OR BEFORE	
December 1, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED	
Disability (physical or mental)	
AS A RESULT, I WAS SUBJECTED TO	
Denied reasonable accommodation for a disability or medical condition PARTICULARS	
From February 1, 2017 to December 1, 2017, I was denied a reasonable accommodation/i while residing at the subject property.	interactive process
I believe I was denied a reasonable accommodation due to my son's disability (physical).	
On February 1, 2017, I requested a larger unit due to my son's disability. Although it was a denied the request stating there was no validity of the accommodation, which e disability. In addition,	approved, the manager xacerbated by son's
On December 1, 2017, I followed-up with regarding the reasonable accommodal larger unit, but she stated there were no units available. However, I believe there was a unfirst request of February 1, 2017 to my last request December 1, 2017. This denial exacendisability. In addition, failed to engage in an interactive process.	nit available from my
This is a violation of Government Code Section 12955, Subdivision (a) and Civil Code 51.	
SIGNED UNDER PENALTY OF PERJURY  By submitting this complaint I am declaring under penalty of perjury under the laws of the State the foregoing is true and correct of my own knowledge, except as to matters stated on my and as to those matters I believe them to be true.	State of California that information and belief,
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	May 14, 2018



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email; contact.center@dfeh.ca.gov

February 14, 2018

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

DFEH Number:

VK CK Sherman Oaks Venture, LLC et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Associate Governmental Program Analyst

(916) 585-8143

carla.rubalcava@dfeh.ca.gov

Carla Rubalcana



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

WK CK Sherman Oaks Venture, LLC

30 S. Wacker Drive, Suite 3600 Chicago, IL 60606

(312) 948-4500

Waterton Property Management, LLC

30 S. Wacker Drive, Suite 3600 Chicago, IL 60606 (312) 948-4500

AGENT FOR SERVICE

**ADDRESS** 

PHONE

CT Corporation System, Agent for Service for WK CK Sherman Oaks Venture, LLC 818 West Seventh Street, Suite 930 Los Angeles, CA 90017

CT Corporation System, Agent for Service for Waterton Property Management, LLC 818 West Seventh Street, Suite 930 Los Angeles, CA 90017



**DFEH NUMBER** 

smoke.

PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS
Apartment		260
	- Allegation 1 -	
I ALLEGE THAT I EXPERIENCE		
ON OR BEFORE		
May 3, 2017	D DEDOEWED	
BECAUSE OF MY ACTUAL O Disability (physical or mental)	RPERCEIVED	
AS A RESULT, I WAS SUBJE	CTED TO	
PARTICULARS	ation for a disability or medical condition	
request to Respondents McIlwa to a quiet/non-smoking apartme around my unit. This reasonable accommodation request to be n by management on or about Ju permanently relocated because caused me asthma, exacerbate	o my disability [physical], I submitted a supplementation, Wilmore and Tenant Liaison and	requesting to be relocated buld be happening inside and iginal reasonable at was submitted and approved in request I requested to be aling second-hand smoke has spondents have done
been relocated.	y or interfere with my reasonable accommodation re	equests and to date I have not
I ALLEGE THAT I EXPERIENCE	- Allegation 2 -	
Discrimination ON OR BEFORE		
May 31, 2017		
BECAUSE OF MY ACTUAL OF Disability (physical or mental)	R PERCEIVED	
AS A RESULT, I WAS SUBJEC		
Denied equal terms and condition PARTICULARS	ons	
On or about late-May 2017, my smoke anywhere on the premise outside of the apartment, including	next door neighbor, who is on a non-smoking lease es, was verbally told by Respondent that ing her balcony. I believe this was deliberately done me for requesting a reasonable accommodation to be	she was permitted to smoke

smoking neighbors. Additionally, this should have never been permitted by Respondent

knows about my reasonable accommodation request and my disability that can be exacerbated by second-hand



### **DFEH NUMBER**

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

February 7, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Age (40 and over); Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied equal terms and conditions

**PARTICULARS** 

- a. On or about December 2, 2017, I received a 3-day notice from Respondent Waterton Property Management, LLC through my lawyer for allegedly parking incorrectly and for having my dog off the leash.
- b. On or about January 25, 2018, I received a 3-day notice to cure from Respondent Waterton Property Management for allegedly blocking accesses and causing a safety hazard due to the presence of boxes and plant outside of my unit.
- c. On or about February 7, 2018, I received another 3-day notice to quit despite the fact that I have responded and/or cured what was asked. In the last year, I have received approximately five 3-day notices and attorney letters regarding situations at the complex that I believe have been handled appropriately by my part. I have personal knowledge that other tenants are not getting the same amount of 3-day notices, if any at all. I believe Respondents at Waterton Property Management, LLC are constantly issuing me baseless 3-day notices as a harassment tactic to push me out as a tenant due to my age and reasonable accommodations requests.

- Allegation 4 -

I ALLEGE THAT I EXPERIENCED

Harassment

ON OR BEFORE

February 7, 2018

BECAUSE OF MY ACTUAL OR PERCEIVED

Age (40 and over); Disability (physical or mental)

PARTICULARS

- a. On or about December 2, 2017, I received a 3-day notice from Respondent Waterton Property Management, LLC through my lawyer for allegedly parking incorrectly and for having my dog off the leash.
- b. On or about January 25, 2018, I received a 3-day notice to cure from Respondent Waterton Property Management for allegedly blocking accesses and causing a safety hazard due to the presence of boxes and plant outside of my unit.
- c. On or about February 7, 2018, I received another 3-day notice to quit despite the fact that I have responded and/or cured what was asked. In the last year, I have received approximately five 3-day notices and attorney letters regarding situations at the complex that I believe have been handled appropriately by my part. I have personal knowledge that other tenants are not getting the same amount of 3-day notices, if any at all. I believe Respondents at Waterton Property Management, LLC are constantly issuing me baseless 3-day notices as a harassment tactic to push me out as a tenant due to my age and reasonable accommodations requests.



**DFEH NUMBER** 

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Feb 14, 2018



2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

January 3, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

Laurelglen Properties LLC et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Mario Anzaldua Associate Governmental Program Analyst 916-585-8153 mario.anzaldua@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

Laurelglen Properties LLC

**ADDRESS** 

PHONE

1181 California Ave., #170 Corona, CA 92881

AGENT FOR SERVICE

Agent for Service for Laureigien Properties LLC **ADDRESS** 

PHONE

6900 Mountain View Rd Bakersfield, CA 93307

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

336

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

July 28, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 



DFEH NUMBER	
950747-308425	
On or about July 28, 2017, I submitted a reasonable accommodation request to Respondent painting crew wear medically necessary protective gear while on my balcony; this is a requirement of my and condition. Respondent denied my request.	ave the disability
- Allegation 2 -  I ALLEGE THAT I EXPERIENCED  Retaliation ON OR BEFORE August 3, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Requested or used a disability-related accommodation AS A RESULT, I WAS SUBJECTED TO Denied equal terms and conditions PARTICULARS On or about August 2, 2017, Respondent  cut all communications with me and had her attorney se husband and me a threatening letter stating our behavior was in violation of our lease and that it interfered their ability to complete their work. All I wanted was my reasonable accommodation granted.	end my d with
SIGNED UNDER PENALTY OF PERJURY  By submitting this complaint I am declaring under penalty of perjury under the laws of the State of Californ the foregoing is true and correct of my own knowledge, except as to matters stated on my information and as to those matters I believe them to be true.	nia that d belief,
SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:

Jan 4, 2018



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 22, 2017





RE: Request to Approve Complaint

DFEH Number:

WP Overland Court Apartments, LP et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava Associate Governmental Program Analyst (916) 585-8143 carla.rubalcava@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code 12955

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

WP Overland Court Apartments, LP

310 N Westlake Blvd. #210 Westlake Village, CA 91362

**Buckingham Property Management** 

2170 N Winery Ave. Fresno, CA 93703 (559) 452-8250

AGENT FOR SERVICE

Agent for Service

for Buckingham Property Management

Management

Agent for Service for WP Overland Court Apartments, LP

**ADDRESS** 

2170 N Winery Ave. Fresno, CA 93703

310 N Westlake Blvd. #210 Westlake Village, CA 91362

PROPERTY TYPE

ADDRESS WHERE VIOLATION

OCCURRED

Apartment

NO. OF UNITS

70

PHONE



**DFEH NUMBER** 

- Allegation -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
July 17, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS

Denied rental/sale/lease; Denied reasonable accommodation for a disability or medical condition; Denied equal terms and conditions

**PARTICULARS** 

On or about July 17, 2017, I was denied rental due of my Emotional Support Animal [ESA]. Although I had all the proper documentation for my ESA, property manager Respondent failed to engage in an interactive process and stated that under no circumstances were pets allowed. I went through a lengthy application process, including an interview on or about May 17, 2017, where there had been no mention of pets not being allowed.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 29, 2017



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 28, 2017

Via [First Class Mail] [Email]



RE: Request to Approve Complaint
DFEH Number:

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava Associate Governmental Program Analyst (916) 585-8143 carla.rubalcava@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code 12955

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

Capron Real Estate, Inc. DBA Vertical Horizon Real Estate & Property Management 2220 Otay Lakes Rd., Suite 502-92 Chula Vista, CA 91915

(619) 847-3100

AGENT FOR SERVICE

Agent for Service for Capron Real Estate, Inc. DBA Vertical Horizon Real Estate & Property Management **ADDRESS** 

PHONE

2220 Otay Lakes Rd, Suite 502-92 Chula Vista, CA 91915

(619) 847-3100

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Condominium

100



**DFEH NUMBER** 

### - Allegation 1 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
June 22, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

On or about June 22, 2017, I submitted a reasonable accommodation to Respondent requesting that I be allowed to have my newly prescribed Emotional Support Animal [ESA] live with me. Respondent immediately denied my request, did not engage in an interactive process and threatened to evict my roommate and me. I immediately, rehomed my ESA with a relative out-of-state, due to fear of being evicted.

### - Allegation 2 -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE July 24, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS Denied reasonable accommodation for a disability or medical condition **PARTICULARS** On or about July 24, 2017, due to push back from Respondent I submitted a second, more detailed reasonable accommodation letter, requesting that my ESA be allowed to live with me. Respondent previously mentioned that the first letter was not specific because it didn't state what my disability was and how the ESA would help me. Respondent discussed my second reasonable accommodation request with the and they decided to again deny my request. owner, Respondent



**DFEH NUMBER** 

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
September 2, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS
Denied equal terms and conditions
PARTICULARS

On or about September 2, 2017, I emailed Respondent accopy of the Fair Employment and Housing Act highlighting my rights as a tenant to have an ESA. To date, Respondents have not responded to this email and maintain that my ESA is not allowed at the subject property.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 28, 2017



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 21, 2017

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

The Steven W. Reiss Trust Dated May 8, 1998 et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888•519•5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava Associate Governmental Program Analyst (916) 585-8143 carla.rubalcava@dfeh.ca.gov



**DFEH NUMBER** COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code 12955 NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE The Steven W. Reiss Trust Dated 1574 W Alexis Ave. May 8, 1998 Anaheim, CA 92802 PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED Other (Duplex) 2



**DFEH NUMBER** 

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE January 1, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental)

AS A RESULT, I WAS

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

On or about January 2017, due to my disability [mental/physical], I submitted a reasonable accommodation to requesting the mold in my unit be removed because it was exacerbating my condition. On or about February 2017, a mold specialist came out and determined the mold damage was extensive and major tear out and repairs needed to be done. I was moved to a hotel, which the landlord reluctantly paid, while the mold in my unit was removed. I moved back in to my unit after the repairs were made, but I quickly noticed that the mold was not properly removed and was merely painted over. We reported this to Respondent that my reasonable accommodation request was not properly addressed.

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE August 1, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS Denied equal terms and conditions

**PARTICULARS** 

On or about late August, 2017, I received a 60-day notice to vacate from Respondent was in retaliation for being vocal about the mold and for requesting reasonable accommodation due to my disability.



#### DFEH NUMBER

**PARTICULARS** 

- Allegation 3 -

- Allegation 4 -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE September 11, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS Denied equal terms and conditions

On or about September 11, 2017, we were notified that an unlawful detainer was filed by Respondent

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE November 8, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS **Evicted PARTICULARS** 

On or about November 8, 2017, I was evicted by Respondents I believe I was ultimately evicted for being vocal about the mold issue in my unit and for requesting a reasonable accommodation.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief. and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 27, 2017



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 22, 2017

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

DFEH Number:

The Kelly Armstrong Revocable Inter Vivos Trust, Dated February 23, 2012 et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely.

Carla Rubalcava

Associate Governmental Program Analyst

(916) 585-8143

carla.rubalcava@dfeh.ca.gov

Carla Rubalcana



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code 12955 & 12955.7

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

ADDRESS

PHONE

The Kelly Armstrong Revocable Inter Vivos Trust, Dated February 23, 2012 63 Central Ave. Sausalito, CA 94965

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

2



### **DFEH NUMBER**

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
August 27, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS

**PARTICULARS** 

On or about August 27, 2017, I told Respondent I had a mental disability. Upon learning of my disability, Respondent started to make more inquiries and insinuations about my disability.

- Allegation 2 -

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
September 11, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS

### **PARTICULARS**

On or about September 11, 2017, I received a harassing email from Respondent with a link to a news article concerning my disability and a message stating, "32 days and counting" [a countdown to the day I would be moving out]. Also on or about September 11, 2017, Respondent sent me an email threatening me. She asked me what I was willing to pay her to resolve what she thought I owed. She was trying to intimidate me with knowledge she had of my past and background concerning my mental disability. Respondent server gave me a concrete amount I owed. I believe she was trying to extort more money from me by insinuating she could divulge my medical history and my past.



### **DFEH NUMBER**

- Allegation 3 -

I ALLEGE THAT I EXPERIENCED
Harassment
ON OR BEFORE
September 18, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS

### **PARTICULARS**

On or about September 18, 2017, Respondent sent me an email stating, "you have been prescribed multiple Rx medications for your condition and might also be diagnosed as schizophrenic". Respondent started to harass me and treat me different upon learning of my disability.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 23, 2017



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

February 16, 2018

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

DFEH Number:

Friendship Manor, Inc. et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Associate Governmental Program Analyst

(916) 585-8143

carla.rubalcava@dfeh.ca.gov

Carla Rubalcava



DFEH NUMBER

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

Friendship Manor, Inc.

**ADDRESS** 

6647 El Colegio Rd. Goleta, CA 93117 PHONE

(805) 968-0771

AGENT FOR SERVICE

Agent for Service for Friendship Manor, Inc.

**ADDRESS** 

6647 El Colegio Rd. Goleta, CA 93117 PHONE

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Condominium

200



#### DFEH NUMBER

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

October 1, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

On or about October, 2017, I submitted a reasonable accommodation to Respondent allowed to keep the window air conditioner due to my disability [physical]. Respondent an interactive process even though I provided him my doctor's note.

requesting that I be failed to engage in

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
January 1, 2018
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO

Evicted

**PARTICULARS** 

a. On or about November, 2017, Respondent served me with an eviction notice and a letter stating that I was being evicted for having a window air conditioner. I believe I was being discriminated because of my reasonable accommodation request and medical need for an air conditioner.

b.	On	or abou	ıt January	2018,	l was	evicted	by	Respondent
----	----	---------	------------	-------	-------	---------	----	------------

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

Signature of Complainant or Complainant's Legal Representative:

DATE:

Feb 16, 2018



2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758
(800) 884-1684 (Voice) I (800) 700-2320 (TTY) | California's Relay Service at 711
http://www.dfeh.ca.gov I Email: contact.center@dfeh.ca.gov

July 27, 2018

Via [First Class Mail] [Email]

RE: Request to Approve Amended Complaint

DFEH Number: HUD Number:

Dear

We have amended your complaint. Please read the proposed amended complaint carefully. If you do not approve of the language on the complaint, do not sign it; instead, contact me within ten (10) calendar days to discuss your concerns. If you agree with the language, please sign and return the amended complaint as soon as possible. We must receive the signed complaint before it can be investigated. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at lezlie.cannon@dfeh.ca.gov or by fax to 1-888-519-5917.

Please note the information you provide is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq. Thank you for your cooperation.

Sincerely,

Lezlie Cannon

Lezlie Cannon Staff Services Manager I 916-585-8154 lezlie.cannon@dfeh.ca.gov



**DFEH NUMBER** HUD NUMBER COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE R and J. Scott Living Trust Dated 715 N. Central Avenue #300 April 4, 2007 Glendale, CA 91203 ADDRESS WHERE VIOLATION PROPERTY TYPE NO. OF UNITS OCCURRED Apartment 20

File Date: August 8, 2017

Amended



DEEU NUMBER

## AMENDED COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DELI NOWIBER	HUD NOWBER

- Allegation -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE March 2, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

**PARTICULARS** 

The Complainant is who is disabled as defined by the federal Fair Housing Act. The Respondents are [Property Manager], Property Manager], of David N. Schultz, Inc.], David N. Schultz, Inc. [Property Management Company] and Park Encino, LLC [Owner].

The Complainant moved to the subject property in or around 03/2015, believing it to be smoke-free. However, as the Complainant soon learned, the subject property was not, in fact, smoke-free, and upon complaining to the Respondents, floor-plan schematic signs were placed around the subject property indicating smoking designations for individual units.

On or around 07/28/2016, new tenants moved into a unit adjacent to the Complainant's, only for her to discover that they were smokers. On 03/02/2017, on behalf of the Complainant, a local fair housing agency submitted to separate doctor's letters to the Respondents, each of which identified the Complainant as an individual with a disability, explained that her disabilities were exacerbated by the exposure to second-hand smoke, and reiterated the Complainant's request for a reasonable accommodation to address the smoking at the subject property. As her complaints to the Respondents went ignored, she began to deposit half of each month's rent into escrow. Aside from a one-month period in which it appeared the smoker was gone, the Complainant deposited half of rent into escrow until in or around 04/2017, when the smoker seems to have left the subject property.

The Complainant alleges that the Respondents intimidated her, stonewalled her and stalled, and made the process overly and unnecessarily burdensome. Finally, in or around 04/2017, the Complainant sent the Respondents a letter requesting compensation for the loss of the use of her home as a result of the smoking.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief. and as to those matters I believe them to be true.

File Date: August 8, 2017

Amended



DFEH NUMBER

**HUD NUMBER** 

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Jul 30, 2018

File Date: August 8, 2017

Amended



DIRECTOR KEVIN KISH

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 800-884-1684 | TDD 800-700-2320 www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

November 14, 2017



Dear

This notice confirms that you have filed a housing inquiry and have been interviewed by a Department of Fair Employment and Housing representative. You must approve, sign and return the complaint before it can be investigated. If you do not approve the language on the complaint, please do not sign the complaint; instead, contact me to discuss your concerns. If you do not return the signed complaint within 5 days, your inquiry will be closed and no further action will be taken.

Please return the signed complaint using the Adobe EchoSign electronic signature. If you need further assistance, please feel free to contact the toll free telephone number at (800) 884-1684 with any questions you may have.

Please note that the information you provided is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Nora Baltierrez-Moreno

Nora Baltierrez-Moreno Consultant II 661-395-2562 nora.baltierrez-moreno@dfeh.ca.gov



COMPLAINANT(S)

ADDRESS

PHONE

OTHER AGGRIEVED PARTIES

TYPE OF DISCRIMINATION AND LAW

General - 12955 a

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME

NAMED IS THE EMPLOYER, PERSON, A	GENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISC	CRIMINATED AGAINST ME
RESPONDENT	ADDRESS	PHONE
AGENT FOR SERVICE	ADDRESS	PHONE
CO-RESPONDENT(S)  Director Berkeley  Housing Authority	ADDRESS 1936 University Avenue, Suite 150 Berkeley, California 94704	PHONE (510) 981-5470
Housing Case Manager/Berkeley Housing Authority	1936 University Ave., Suite 150 Berkeley CA 94702	(510) 981-5470
LBL Properties	5735 Shattuck Avenue Oakland ,CA 94609	(510) 594-9700
LBL Properties	5735 Shattuck Avenue Oakland, CA 94609	(510) 594-9700



DEEH NIIMBER		HUD NUMBER
PROPERTY TYPE Apartment	ADDRESS WHERE VIOLATION OCCURED	NO. OF UNITS
I ALLEGE THAT I EXPERIENCED	Discrimination	
ON OR BEFORE	July 26, 2017	
BECAUSE OF MY ACTUAL OR PERCEIVED	Disability - [physical or mental]	
AS A RESULT, I WAS	Denied reasonable accommodation	
located at and is owned by and Berkeley Housing Authority (HA), Housing Repreto my disability. This is a violation of Gov On April 12, 2017, I informed the respond specifically, I needed a 24 hour per day a reasonable accommodation by presented a letter from my primary care p	This property is an apartment of and managed by LBL Property,  Director, Seentative. II. I believe that I was denied reasonable vernment Code section 12955 (a). My belief is based and seven days per week live-in aide. B. On April Administrative Assistant. C. On provider confirming my need for reasonable accommodation. D. On June 27, 2017, the decision to design and seven days per week live-in aide.	Property Manager Representative and le accommodation due sed on the following: A e to my disability, 26, 2017, I was denied June 6, 2017, I hmodation. This was
accommodation was upheld by	Director.	ion, mo reasonable



DEEH NUMBER

HUD NUMBER

SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

Signature of Complainant or Complainant's Legal Representative:

Date:

Nov 14, 2017



USA Multifamily Management, Inc.

AKA USA Properties

# COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DFEH NUMBER		HUD NUMBER
COMPLAINANT(S)	ADDRESS	PHONE
OTHER AGGREVED PARTIES	TYPE OF DISC	ORIMINATION AND LAW
	Harassment o	r Retaliation - 12955 f
NAMED IS THE EMPLOYER, PERSON, AGE	NCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMIN	ATED AGAINST ME
RESPONDENT	ADDRESS	PHONE
Vintage Chateau, LP	325 N McDowell Blvd Petaluma California 94954	
AGENT FOR SERVICE	ADDRESS	PHONE
USA Properties Fund	3200 Douglas Blvd., Suite 200 Roseville California 95661	
CO-RESPONDENT(S)	ADDRESS	. PHONE
	2.5	

3200 Douglas Blvd., Suite 200 Roseville California

95661

(916) 773-6060



LIEBRI WILLWEE		HUD NUMBER
PROPERTY TYPE Apartment	ADDRESS WHERE VIOLATION OCCURED	NO. OF UNITS 75
LALLEGE THAT LEXPERIENCED	Retaliation	
ON OR BEFORE	August 29, 2017	*
BECAUSE OF MY ACTUAL OR PERCEIVED	Disability - [physical or mental]	
AS A RESULT, I WAS	Other	
STATEMENT OF FACTS		
Properties Fund Inc. The manager, and conditions because of housing complaint, I have been section 12955 (f). My belief is a. On March 28, 2017, per my the manager, completely clear the floors in furniture into the living room by the maintenance man that b. During the first week of Mathat the path to the windows there is no provision in the le later, a building code. was an earthquake or other enthat the furniture was there te that the building code is used reasons, I was told that I must duress".	apartment building owned by Vintage Chateau, LP are lanager is  to retaliatory acts in the form of violation notices and if my engagement in a protected activity. On October on the basis of denial of reasonable accommodation. Subjected to retaliatory actions. This is violation of Grabased on the following:  request, a maintenance man came to clean my kitcher sent me an email verifying the date and time and to the area or the work would not be performed. I and represents including a table and chairs and left. When we return the manager had performed a walk-through at that time are that was violated, and instead that we had broken stated that a pathway must be kept clear to the win mergency, she would not have been able to reach us. I imporarily due to the cleaning, that no one was in the by contractors and therefore should not apply to tenat it sign and return the lease violation notice. I signed the	subjected to unequal 31, 2016 I filed a I believe that based overnment Code in floors. Prior to this, elling me to my son, moved the med we were notified me.  stating I was informed that first a tax code, and dows and that if there I informed unit at the time, and ents. Despite these me violation "under
who have not received any no	h other tenants who also have furniture located in fro stices of lease violation.	nt of their windows
<ul> <li>I have kept records of the em retaliation for the Fair Housi</li> </ul>	ails exchanged between and me as Ing complaint I submitted to DFEH on October 31, 20	believe this is in

one of the maintenance persons on the property, also continues to use toxic chemicals in the common areas that exacerbate my medical conditions. This occurred during the period preceding

my housing complaint filed on October 31, 2016 and continuing. I believe that this is also in retaliation of filing a complaint of housing discrimination.



THE THE WEST

## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

THE STREET

SEPTED UNDER PORALTY OF PERSON

By submitting this compared 1 am declaring ender penalty of perjusy under the laws of the State of Cabbords that the foregoing is true and contact of my own knowledge, except as in matters sected on my information and belief, and as to those matters I refleve them to be inje.

CH 2:17

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 21, 2018

Via Email:	

RE: Request to Approve Complaint

DFEH Number:

Coronado Square, LP et al.

Dear

The enclosed draft complaint is the result of your interview with me on February 8, 2018. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via Adobe EchoSign electronic signature. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

If your inquiry is closed and you would like to appeal the decision, you may submit a written request within 10 days of the closure date to DFEH, Supervisor Colleen Janatpour, 2218 Kausen Drive, Suite 100 Elk Grove, CA 95758, <a href="mailto:colleen.janatpour@dfeh.ca.gov">colleen.janatpour@dfeh.ca.gov</a> or by calling (510)789-1040.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Lareeceia Harris

Lareeceia Harris Staff Services Analyst 510-789-1051 lareeceia.harris@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

Coronado Square, LP

**ADDRESS** 

230 S Coronado St. #41 Los Angeles, CA 90057

PHONE

(213) 387-5426

**Unger & Associates** 

13347 Ventura Blvd Ste. 201 Sherman Oaks, CA 91423

(818) 783-4969

PHONE

AGENT FOR SERVICE

Agent for Service for

Coronado Square, LP

**ADDRESS** 

100 So. Citrus Ave Los Angeles, CA 90036

Agent for Service for

Unger & Associates

13347 Ventura Blvd Ste. 201 Sherman Oaks, CA 91423

(818) 783-4969

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

40



### **DFEH NUMBER**

- Allegation 1 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE August 28, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO Denied reasonable accommodation for a disability or medical condition **PARTICULARS** From April 2017 through August 28, 2017, I was denied reasonable accommodations/interactive process while residing in my one-bedroom apartment located at property is owned by Coronado Square, LP and managed by Unger & Associates, Inc. and its employee The subject property has 40 units. My rental amount is \$1539.00. In early spring 2017, the City of Los Angeles instructed to place a padlock on the entrance gate because it was broken. After the padlock was placed on it, I made a reasonable accommodation request asking to repair the gate lock to allow me to enter the pool areas closest to my door to accommodate my disability. This request was denied and failed to engage in an interactive process. From April 2017 through August 28, 2017, I made a reasonable accommodation request to the manager. to allow me to have a closer parking space to accommodate my disability (physical). she would need to look into it, but never did. In May 2017, I was aware that there were available parking spaces and I asked again for a closer parking space. However, told me to ask another tenant if she would trade spaces with me. From May and August 2017, my neighbor moved out and I began to use the parking space #31, which was closer to my back door and accommodated my disability. However, notified me that I was not allowed to park in this parking space, thus continuing to deny my requested for a closer parking space. This denial exacerbated my disability. In addition, failed to engage in an interactive process.

This is a violation of Government Code, Section 12955, Subdivision (a) and Civil Code 51 of the Unruh Act.



DFEH NUMBER

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
May 1, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO
Subjected to discriminatory statements/advertise

Subjected to discriminatory statements/advertisement

PARTICULARS

In or around April 2017 through May 2017, I was subjected to discriminatory statements in regards to my disability (physical) by When I made the reasonable accommodation request to have a closer parking space to accommodate my disability. Sales said, "you do not look disabled and what is your problem". In addition, in May 2017, Stated "how are you able to work in the flower bed planting flowers if you are disabled".

This is a violation of Government Code, Section 12955, Subdivision (a) and Civil Code 51 of the Unruh Act.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Mar 27, 2018

### Housing Discrimination Complaint

	3.** 32°			
Case N	DEH Matter Date Filed: June 2, 2017			
1.	Complainants:			
2.	Complainant Representatives:			
3.	Other Aggrieved Parties:			
4.	The following is alleged to have occurred or is about to occur:			
	<ul> <li>Failure to make reasonable accommodation</li> <li>Discriminatory refusal to rent</li> </ul>			
5.	The alleged violation occurred because of:			
	Handicap			
6.	Address and location of the property in question (or if no property is involved, the city and state where the discrimination occurred):			
	Cambridge Square Apartments			
7.	Respondents:			
	H&L Property Management 4304 Redwood Highway Ste. 200 San Rafael, CA 94903  RECEIVED			
	JUN <b>09</b> 2017			
	0011 00 2011			

Department of Fair Employment & Housing Elk Grove Rifkind Law Group 100 Drakes Landing Road, Suite 260 Greenbrae, CA 94904

8. The following is a brief and concise statement of the facts regarding the alleged violation:

Complainant is a disabled veteran. Respondents are H&L Management Co. (Management Company). (Manager) and their attorney Complainant alleges Respondents have refused to accommodate her disabilities.

In late September 2016, Complainant's medical provider altered her mental health medication, which on December 20, 2016 resulted in a manic episode on the property where she created noise, and someone called the police. As a result, the complainant was hospitalized. When she returned home from the hospital, she found a Three-Day Notice to Quit.

On January 5, 2017, there was an altercation between Complainant and Respondent which resulted in Complainant being arrested and charged with false imprisonment (Complainant has since been admitted to a pretrial diversion program). Respondents issued Complainant a notice terminating her tenancy on January 16, 2017.

On March 5, 2017, Complainant's attorney at Sonoma County Legal Aid submitted a reasonable accommodation request asking Respondents to rescind the notice due to the aforementioned events being caused by her disability. Respondent request on March 20, 2017. Subsequently, Complainant submitted more detailed accommodation request to Respondent on April 14, 2017. Respondent denied the request, but offered to extend Complainant's tenancy until May 31, 2017. Complainant sought assistance from Fair Housing Advocates of Northern California, who explained to Respondent that an extension did not meet Complainant's need, and followed up with further verification of Complainant's disabilities. This included a letter from her medical provider stating that the Complainant's medication has since stabilized, that she did not pose a threat to others, and that in his opinion. there was little likelihood the December and January events would occur again in the future. Complainant also offered to abide by a behavioral agreement. Despite intervening medical treatment to address Complainant's behavior, Respondent has continued to deny Complainant's request to allow her to remain a tenant.

9. The most recent date on which the alleged discrimination occurred:

May 19, 2017, and is continuing.

- 10. Types of Federal Funding Identified:
- 11. The acts alleged in this complaint, if proven, may constitute a violation of the following sections:

804f3B, and 804a or f of Title VIII of the Civil Rights Act of 1968 as amended by the Fair Housing Act of 1988.

Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

5|2017 Date

N O T E : HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.

## **Housing Discrimination Complaint**

Case N	lumber:
1.	Complainants:
2.	Complainant Representatives:
3.	Other Aggrieved Parties:
4.	The following is alleged to have occurred or is about to occur:
	<ul> <li>Failure to make reasonable accommodation</li> <li>Discriminatory refusal to rent</li> </ul>
5.	The alleged violation occurred because of:
	• Handicap
6.	Address and location of the property in question (or if no property is involved, the city and state where the discrimination occurred):
	Cambridge Square Apartments
7.	Respondents:
	H&L Property Management 4304 Redwood Highway Ste. 200 San Rafael, CA 94903
	<u> </u>

Rifkind Law Group 100 Drakes Landing Road, Suite 260 Greenbrae, CA 94904

8. The following is a brief and concise statement of the facts regarding the alleged violation:

Complainant is a disabled veteran. Respondents are H&L Management Co. (Management Company), (Manager) and their attorney, Complainant alleges Respondents have refused to accommodate her disabilities.

In late September 2016, Complainant's medical provider altered her mental health medication, which on December 20, 2016 resulted in a manic episode on the property where she created noise, and someone called the police. As a result, the complainant was hospitalized. When she returned home from the hospital, she found a Three-Day Notice to Quit.

On January 5, 2017, there was an altercation between Complainant and Respondent which resulted in Complainant being arrested and charged with false imprisonment (Complainant has since been admitted to a pretrial diversion program). Respondents issued Complainant a notice terminating her tenancy on January 16, 2017.

On March 5, 2017, Complainant's attorney at Sonoma County Legal Aid submitted a reasonable accommodation request asking Respondents to rescind the notice due to the aforementioned events being caused by her disability. Respondent request on March 20, 2017. Subsequently, Complainant submitted more detailed accommodation request to Respondent on April 14, 2017. Respondent denied the request, but offered to extend Complainant's tenancy until May 31, 2017. Complainant sought assistance from Fair Housing Advocates of Northern California, who explained to Respondent that an extension did not meet Complainant's need, and followed up with further verification of Complainant's disabilities. This included a letter from her medical provider stating that the Complainant's medication has since stabilized, that she did not pose a threat to others, and that in his opinion, there was little likelihood the December and January events would occur again in the future. Complainant also offered to abide by a behavioral agreement. Despite intervening medical treatment to address Complainant's behavior, Respondent has continued to deny Complainant's request to allow her to remain a tenant.

9. The most recent date on which the alleged discrimination occurred:

May 19, 2017, and is continuing.

- 10. Types of Federal Funding Identified:
- 11. The acts alleged in this complaint, if proven, may constitute a violation of the following sections:

804f3B, and 804a or f of Title VIII of the Civil Rights Act of 1968 as amended by the Fair Housing Act of 1988.

Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

NOTE: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 28, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

Ocwen Financial Corporation et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at sack.keophimane@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Sack Keophimane

Sack Keophimane
Associate Governmental Program Analyst
916-585-7078
sack.keophimane@dfeh.ca.gov



### **DFEH NUMBER**

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

Ocwen Financial Corporation

2711 Centerville Road, Ste 400 Wilmington, DE 19808

Ocwen Loan Servicing, LLC

1661 Worthington Road, Ste 100 West Palm Beach, FL 33409 888-554-6599

AGENT FOR SERVICE

**ADDRESS** 

PHONE

Coporation Service Company Which Will Do Business in California - As CSC - Lawyers Incorporation Service (C1592199), Agent for Service for Ocwen Loan Servicing, LLC 1661 Worthington Road, Ste 100 West Palm Beach, FL 33409

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

House

1



DFEH NUMBER

- Allegation -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
March 1, 2018
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO
Denied loan
PARTICULARS

Starting from March 2017, I requested a mortgage loan modification a couple of times from the Relationship Management Department (RMD) due to financial hardship. During this time, the RMD denied my application and said I did not qualify because job loss was not a hardship. I told the RMD that I was experiencing a financial hardship because I lost my job due to a car accident and the injury affected my disability both mentally and physically. On January 1, 2018, I requested another loan modification due to my disability and financial hardship and again, my loan modification request was denied. The RMD indicated that I did not qualify based on disability even though disability and health related issues were part of the qualification criteria for a loan modification. On March 1, 2018, Ocwen stopped receiving my mortgage payment. I believe I was denied a mortgage loan modification and discriminated based on my disability.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	Mar 28, 2018



2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

January 29, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Complaint

DFEH Number:

Beachport Cottages Homeowners Association et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Mario Anzaldua Associate Governmental Program Analyst 916-585-8153 mario.anzaldua@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

**PHONE** 

### TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

		5 - 11 - 1 - 1 - 1
NAMED IS THE EMPLOYER, PERSON, A	GENCY, ORGANIZATION OR GOVERNME	NT ENTTITY WHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
Beachport Cottages Homeowners Association	6453 Independence Ave. Woodland Hills, California 9136	818-883-4202 67
Tandem Property Management Inc	1536 E. Warner Avenue, Suite Santa Ana, CA 92705	A 818-883-2402
AGENT FOR SERVICE	ADDRESS	PHONE
Agent for Service for Tandem Property Management Inc	1536 E. Warner Avenue, Suite Santa Ana, CA 92705	A 818-883-2402
*		
Agent for Service for Beachport Cottages Homeowners Association	6453 Independence Ave. Woodland Hills, California 9136	818-883-4202
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS
Condominium		30



#### DFEH NUMBER

- Allegation -

I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE July 21, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO

Denied access or services to accommodations or facilities

#### **PARTICULARS**

- a. On or around April 26, 2017, we made a reasonable accommodation request to Respondent Beach Cottages Homeowners Association and Respondent Tandem Property Management asking them to allow me to park in the guest parking space due to my disability. We provided them proof of my DMV handicap placard to support my request for a reasonable accommodation.
- b. On or around May 14, 2017, Respondent Beach Cottages Homeowners Association and Respondent Tandem Property Management denied my request to park in the guest parking space.
- c. On or around July 21, 2017, Respondent Beach Cottages Homeowners Association and Respondent Tandem Property Management conditionally approved my request, allowing me to park in the guest parking space only until September 30, 2017.
- d. On or about the beginning of September, 2017, I submitted another reasonable accommodation request for the Respondents to extend my reasonable accommodation and grant me a parking space in the guest parking lot indefinitely while I reside at the subject property. The Respondents continue to deny my reasonable accommodation request.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

{{Dte\_es\_:signer1: date}}



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

April 4, 2018

Via [First Class Mail] [Email]



RE: Request to Approve Amended Complaint

DFEH Number:

**HUD Number:** 

BRE Alameda/MF Property Owner LLC et al.

Dear

We have amended your complaint based on the changes you requested. Please read the proposed amended complaint carefully. If you do not approve of the language on the complaint, do not sign it; instead, contact me within ten (10) calendar days to discuss your concerns. If you agree with the language, please sign and return the amended complaint as soon as possible. We must receive the signed complaint before it can be investigated. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please note the information you provide is subject to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq. Thank you for your cooperation.

Sincerely,

Mario Anzaldua

Associate Governmental Program Analyst

Merio Suzaldia

916-585-8153

mario.anzaldua@dfeh.ca.gov



**DFEH NUMBER** HUD NUMBER

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

ADDRESS

PHONE

BRE Alameda/MF Property Owner LLC

222 S Riverside Plaza Suite 2000 Chicago, IL 60606

FPI Management, Inc.

800 Iron Point Rd. Folsom, CA 95630

(916) 357-5300





Lincoln University Extensions -Housing

KW Alameda, LLC

401 15th St. Oakland, CA 94612

151 S. El Camino Beverly Hills, CA 90212 (510) 628-8010

(310) 887-6400

AGENT FOR SERVICE

Agent for Service for FPI Management, Inc.

File Date: March 12, 2018 Amended

**ADDRESS** 

800 Iron Point Rd. Folsom, CA 95630 PHONE

(916) 357-5312

Page 1 of 4



DFEH NUMBER

**HUD NUMBER** 

CSC - Lawyers Incorporating Services, Agent for Service for BRE Alameda/MF Property Owner LLC

2710 Gateway Oaks Drive, Suite 150N Sacramento, CA 95833

Agent for Service for Lincoln University Extensions - Housing

401 15th Street Oakland, CA 94612

(C T CORPORATION SYSTEM), Agent for Service for KW Alameda, LLC

(C T CORPORATION 818 W Seventh Street, Suite 930 nt for Service for KW Los Angeles, CA 90017

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

100

File Date: March 12, 2018

Amended



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 14, 2018

Via [Fmail]

RE: Request to Approve Complaint

**DFEH Number:** 

Park I Spectrum LLC et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Associate Governmental Program Analyst

(916) 585-8143

carla.rubalcava@dfeh.ca.gov

Carla Rubalcava



### **DFEH NUMBER**

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

Park I Spectrum LLC

550 Newport Center Dr. Newport Beach, CA 92660

The Irvine Company Apartment

Communities, Inc.

550 Newport Center Dr. Newport Beach, CA 92660

(949) 333-3020

AGENT FOR SERVICE

**ADDRESS** 251 Little Falls Dr.

PHONE

CSC - Lawyers Incorporating Service (C1592199), Agent for Service for Park I Spectrum LLC

Wilmington, DE 19808

CSC - Lawyers Incorporating Service (C1592199), Agent for Service for The Irvine Company Apartment Communities, Inc.

251 Little Falls Dr. Wilmington, DE 19808

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

100+



### **DFEH NUMBER**

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
October 1, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental); Source of income

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

- a. On or about May 26, 2017, due to my disability (physical) and source of income (SSI), I submitted a reasonable accommodation request to leasing agent asking that I be allowed to pay rent on the 3<sup>rd</sup> Wednesday of every month. The agent collected a \$3400.00 deposit plus the first month's rent, approved my rental application and verbally accepted my reasonable accommodation request. I moved into my unit within 36 hours of having my rental application approved.
- b. On or about early-July 2017, I received a 3-day notice to pay or quit. I spoke to management regarding the reasonable accommodation request that had been in place for me to pay the 3<sup>rd</sup> Wednesday of every month. Management advised that it was not written on the lease but that they would look into it. On the 3<sup>rd</sup> Wednesday of July, I paid my rent plus the late fee and complained that the \$75 late fee was causing me hardship.
- c. On or about early-August 2017, I received a 3-day notice to pay or quit. I again spoke to management and reminded them of my reasonable accommodation request. On the 3<sup>rd</sup> Wednesday of August, I paid my rent plus the late fee and complained that the \$75 late fee was causing me hardship.
- d. On or about early-September 2017, I received a 3-day notice to pay or quit. I again spoke to management and reminded them of my reasonable accommodation request. On the 3<sup>rd</sup> Wednesday of September, I paid my rent plus the late fee and again complained that the \$75 late fee was causing me hardship.
- e. On or about October 18 2017, Management rejected my rent payment and advised that an eviction had been filed. Management would accept my rent payment only if I paid an additional \$600 for legal fees. Additionally, they requested that I provide proof of my SSI status and that I receive my SSI check on the 3<sup>rd</sup> Wednesday of each month.



### **DFEH NUMBER**

**PARTICULARS** 

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
December 14, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental); Source of income
AS A RESULT, I WAS SUBJECTED TO
Evicted

On or about December 14, 2017, I was evicted due to my reasonable accommodation request and source of income.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Mar 14, 2018



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 19, 2017

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

DFEH Number:

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed Unruh complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888•519•5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Mario Anzaldua Associate Governmental Program Analyst 916-585-8153 mario.anzaldua@dfeh.ca.gov



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

DFEH NUMBER					
<u> </u>					
COMPLAINANT	ADDRESS	PHONE			
		TYPE OF DISCRIMINATION AND LAW Civil Code 51, et seq			
NAMED IS THE EMPLOYER, PERSON, AGEN	NCY, ORGANIZATION OR GOVERNME	NT ENTTITY WHO DISCRIMINATED AGAINST ME			
RESPONDENT(S)	ADDRESS	PHONE			
- Allegation - I ALLEGE THAT THE RESPONDENT TOOK THE FOLLOWING ADVERSE ACTIONS AGAINST THE COMPLAINANT Complainant was denied full and equal accommodations, advantages, facilities, privileges, or services by a					
business establishment of one or more Fair Employment and Housing Act (which incorporates Civil Code 51) protected basis.  ON OR BEFORE 12/5/2017 12:00:00 AM BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental); Sex/Gender; Sexual orientation AS A RESULT, I WAS SUBJECTED TO Denied Full or Equal Accommodations, Advantages, Facilities, Privileges, or Services by a Business Establishment – Including both Private and Public Entities					
PARTICULARS  a. On or about July 2, 2017, Responde was aware I had an ESA when I moved		ny Emotional Support Animal [ESA]. She			
b. On or about July 4, 2017, Responde rid of my ESA.	nt came to my house and	kicked my ESA. She again insisted I get			
c. On or about July, 6, 2017, I provided engage with me with my reasonable ac it.	my doctor's note prescribing my commodation request and insist	refuses to s she does not likes dogs and to get rid of			
d. On or about July 10, 2017, Responde	ent called me a "punk a**	f*g".			



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

### **DFEH NUMBER**

e. On or about December 5, 2017, to this day Respondent refuses to address my work orders in retaliation for asking for a reasonable accommodation for my ESA. In doing so, she is hoping I move out sooner.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 20, 2017



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 2, 2018

Via [Email]

DE Bassastta Ammassa Cours

RE: Request to Approve Complaint
DFEH Number:

Reseda Park, L.P. et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Associate Governmental Program Analyst

(916) 585-8143

carla.rubalcava@dfeh.ca.gov

Carla Rubalcava



### **DFEH NUMBER**

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

Reseda Park, L.P.

5150 Overland Ave. Culver City, CA 90230 (818) 345-2490

GK Management Co., Inc.

5150 Overland Ave.

(310) 280-5084

3

Culver City, CA 90230

AGENT FOR SERVICE

**ADDRESS** 

PHONE

Agent for Service

for Reseda Park, L.P.

5150 Overland Ave. Culver City, CA 90230

Agent for Service for GK Management Co., Inc.

5150 Overland Ave. Culver City, CA 90230

PROPERTY TYPE

ADDRESS WHERE VIOLATION OCCURRED

NO. OF UNITS

Apartment

100



### **DFEH NUMBER**

- Allegation 1 -

I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

November 1, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

a. On or about October 2016, due to my disability [physical], I submitted a reasonable modification request to management requesting that the flooring in my unit be replaced, specifically the transition strip that divides the kitchen and living area. Respondents failed to engage in an interactive process and my request went ignored. This same reasonable modification request was originally submitted and ignored in 2015, after I suffered a devastating fall caused by the faulty installation of the above-mentioned transition strip.

b. On or about November 2017, due to my disability [physical], I submitted a reasonable accommodation request to management requesting that the moldy cabinets in my unit be replaced. Respondents denied my request.

- Allegation 2 -

#### I ALLEGE THAT I EXPERIENCED

Discrimination

ON OR BEFORE

February 1, 2017

### BECAUSE OF MY ACTUAL OR PERCEIVED

Age (40 and over); Disability (physical or mental); National Origin (includes language restrictions)

AS A RESULT, I WAS SUBJECTED TO

Denied equal terms and conditions

#### **PARTICULARS**

On or about February 2017, due to my disability [physical], I again submitted a reasonable modification request to management requesting that the flooring in my unit be replaced, specifically the transition strip that divides the kitchen and living area. Respondents did not immediately comply with my request and only did so when I contacted Code Enforcement about the issue. It took management approximately 25 months to address my reasonable modification request. I believe I was denied equal terms and conditions due to my National Origin [Persian], Age, and Disability.

### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Mar 2, 2018



2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 21, 2017

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

DFEH Number:

The Steven W. Reiss Trust Dated May 8, 1998 et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888•519•5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seg.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava Associate Governmental Program Analyst (916) 585-8143 carla.rubalcava@dfeh.ca.gov



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

COMPLAINANT

ADDRESS

PHONE

TYPE OF DISCRIMINATION AND LAW

Civil Code 51, et seq

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

ADDRESS

PHONE

The Steven W. Reiss Trust Dated
May 8, 1998

Anaheim, CA 92802



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

DFEH NUMBER

### - Allegation 1 -

## I ALLEGE THAT THE RESPONDENT TOOK THE FOLLOWING ADVERSE ACTIONS AGAINST THE COMPLAINANT

Complainant was denied full and equal accommodations, advantages, facilities, privileges, or services by a business establishment of one or more Fair Employment and Housing Act (which incorporates Civil Code 51) protected basis.

### ON OR BEFORE

1/1/2017 12:00:00 AM

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

### AS A RESULT, I WAS SUBJECTED TO

Denied Full or Equal Accommodations, Advantages, Facilities, Privileges, or Services by a Business Establishment – Including both Private and Public Entities

#### **PARTICULARS**

On or about January 2017, due to my disability [mental/physical], I submitted a reasonable accommodation to Respondent Reiss requesting the mold in unit be removed because it was exacerbating my condition. On or about February 2017, a mold specialist came out and determined the mold damage was extensive and major tear out and repairs needed to be done. I was moved to a hotel, which the landlord reluctantly paid, while the mold in my unit was removed. I moved back in to my unit after the repairs were made, but I quickly noticed that the mold was not properly removed and was merely painted over. We reported this to Respondent etting her know that my reasonable accommodation request was not properly addressed

### - Allegation 2 -

## I ALLEGE THAT THE RESPONDENT TOOK THE FOLLOWING ADVERSE ACTIONS AGAINST THE COMPLAINANT

Complainant was denied full and equal accommodations, advantages, facilities, privileges, or services by a business establishment of one or more Fair Employment and Housing Act (which incorporates Civil Code 51) protected basis.

#### ON OR BEFORE

8/1/2017 12:00:00 AM

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

### AS A RESULT, I WAS SUBJECTED TO

Denied Full or Equal Accommodations, Advantages, Facilities, Privileges, or Services by a Business Establishment – Including both Private and Public Entities

### **PARTICULARS**

On or about late August, 2017, I received a 60-day notice to vacate from Respondent lateral la



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

#### DFEH NUMBER

#### - Allegation 3 -

### I ALLEGE THAT THE RESPONDENT TOOK THE FOLLOWING ADVERSE ACTIONS AGAINST THE COMPLAINANT

Complainant was denied full and equal accommodations, advantages, facilities, privileges, or services by a business establishment of one or more Fair Employment and Housing Act (which incorporates Civil Code 51) protected basis.

#### ON OR BEFORE

9/11/2017 12:00:00 AM

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

#### AS A RESULT, I WAS SUBJECTED TO

Denied Full or Equal Accommodations, Advantages, Facilities, Privileges, or Services by a Business Establishment – Including both Private and Public Entities

#### **PARTICULARS**

On or about September 11, 2017, we were notified that an unlawful detainer was filed by Respondent

#### - Allegation 4 -

## I ALLEGE THAT THE RESPONDENT TOOK THE FOLLOWING ADVERSE ACTIONS AGAINST THE COMPLAINANT

Complainant was denied full and equal accommodations, advantages, facilities, privileges, or services by a business establishment of one or more Fair Employment and Housing Act (which incorporates Civil Code 51) protected basis.

#### ON OR BEFORE

11/8/2017 12:00:00 AM

#### BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

#### AS A RESULT, I WAS SUBJECTED TO

Denied Full or Equal Accommodations, Advantages, Facilities, Privileges, or Services by a Business Establishment – Including both Private and Public Entities

#### **PARTICULARS**

On or about November 8, 2017, I was evicted by Respondents. I believe I was ultimately evicted for being vocal about the mold issue in my unit and for requesting a reasonable accommodation.



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

**DFEH NUMBER** 

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 27, 2017



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 I Elk Grove I CA I 95758 (800) 884-1684 I TDD (800) 700-2320 http://www.dfeh.ca.gov I email: contact.center@dfeh.ca.gov

December 22, 2017

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

DFEH Number:

WP Overland Court Apartments, LP et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888•519•5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava Associate Governmental Program Analyst (916) 585-8143 carla.rubalcava@dfeh.ca.gov



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Civil Code 51, et seq

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

WP Overland Court Apartments, LP

**ADDRESS** 

PHONE

310 N Westlake Blvd. #210 Westlake Village, CA 91362

**Buckingham Property Management** 

2170 N Winery Ave. Fresno, CA 93703

(559) 452-8250

AGENT FOR SERVICE

Agent for Service for WP Overland Court Apartments, LP

Agent for Service for Buckingham Property Management

**ADDRESS** 

310 N Westlake Blvd. #210 Westlake Village, CA 91362

> 2170 N Winery Ave. Fresno, CA 93703

PHONE



## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA UNRUH CIVIL RIGHTS ACT

DFEH NUMBER

#### - Allegation -

## I ALLEGE THAT THE RESPONDENT TOOK THE FOLLOWING ADVERSE ACTIONS AGAINST THE COMPLAINANT

Complainant was denied full and equal accommodations, advantages, facilities, privileges, or services by a business establishment of one or more Fair Employment and Housing Act (which incorporates Civil Code 51) protected basis.

ON OR BEFORE

7/17/2017 12:00:00 AM

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental)

AS A RESULT, I WAS SUBJECTED TO

Denied Full or Equal Accommodations, Advantages, Facilities, Privileges, or Services by a Business Establishment – Including both Private and Public Entities

**PARTICULARS** 

On or about July 17, 2017, I was denied rental due of my Emotional Support Animal [ESA]. Although I had all the proper documentation for my ESA, property manager Respondent failed to engage in an interactive process and stated that under no circumstances were pets allowed. I went through a lengthy application process, including an interview on or about May 17, 2017, where there had been no mention of pets not being allowed.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Dec 28, 2017



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

March 30, 2018

Via Email

RE: Request to Approve Complaint

DEEH Number:

Williams Family Trust et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Associate Governmental Program Analyst

(916) 585-8143

carla.rubalcava@dfeh.ca.gov

Carla Rubalcaria



Apartment

## COMPLAINT OF DISCRIMINATION UNDER THE PROVISIONS OF THE CALIFORNIA FAIR EMPLOYMENT AND HOUSING ACT

DFEH NUMBER COMPLAINANT **ADDRESS** PHONE TYPE OF DISCRIMINATION AND LAW Government Code § 12955 Civil Code § 51, et seq. NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME RESPONDENT(S) **ADDRESS** PHONE Williams Family Trust 6520 Platt Ave. #253 West Hills, CA 91307 PROPERTY TYPE ADDRESS WHERE VIOLATION NO. OF UNITS OCCURRED

8



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- Allegation -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
January 5, 2018
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO
Denied equal terms and conditions
PARTICULARS

I was discriminated again	st and denied equal terms and conditions at the subject property
	he subject property is an 8 unit apartment building owned by the Williams Family Trust
and managed by trustee,	and onsite manager,

On or about December 31, 2017, the day before I was to move in, I was informed I was being denied rental of unit due to my Emotional Support Animal (ESA).

On or about January 5, 2018, after further discussions with management, I was allowed to move in with the condition that my monthly rent would go up from approximately \$2245.00 to \$2390.00 because of the my ESA. Prior to signing, the lease verbiage was revised to replace all mentions of "pet" with "service dog".

I believe I was discriminated against and denied equal terms and conditions because of my need for an ESA and as a result, my monthly rent went up.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Apr 4, 2018



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

April 12, 2018



RE: Request to Approve Complaint

DFEH Number:

Shaun-T/CIP Fair Oaks, LLC et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at carla.rubalcava@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Carla Rubalcava

Carla Rubalcava Associate Governmental Program Analyst (916) 585-8143 carla.rubalcava@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seq.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

**ADDRESS** 

PHONE

Shaun-T/CIP Fair Oaks, LLC

30012 Ivy Glenn Drive, Ste. 200 Laguna Niguel, CA 92677



AGENT FOR SERVICE

Agent for

Service for Shaun-T/CIP Fair Oaks, LLC

**ADDRESS** 

30012 Ivy Glenn Dr., Ste. 200 Laguna Niguel, CA 92677

PHONE

PROPERTY TYPE

ADDRESS WHERE VIOLATION

OCCURRED

Apartment

95+

NO. OF UNITS



#### **DFEH NUMBER**

- Allegation 1 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE November 12, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental) AS A RESULT, I WAS SUBJECTED TO Subjected to discriminatory statements/advertisement **PARTICULARS** was discriminated against and subjected to discriminatory statements at due to my mental disability. The Respondents are owner, Shaun-T/CIP Fair Oaks, LLC and onsite property manager, On or about November 12, 2017, I experienced a mental health crisis, as a result of my mental disability, and sought Respondent for help. Instead of coming to my aid, Respondent made a video recording of my mental state and called me crazy, weird, and stupid. The police were called and I was taken to the psychiatric ward. Allegation 2 -I ALLEGE THAT I EXPERIENCED Discrimination ON OR BEFORE November 30, 2017 BECAUSE OF MY ACTUAL OR PERCEIVED Disability (physical or mental); Association with someone of a protected class AS A RESULT, I WAS SUBJECTED TO Denied equal terms and conditions PARTICULARS We were discriminated against and denied equal terms and conditions at due to mental disability. The Respondents are owner, Shaun-T/CIP Fair Oaks. LLC and onsite property manager, On or about November 15, 2017, only days after mental health crisis, management issued us an incurable three-day notice to vacate. On or about November 15 through 30, 2017, we received harassing text messages from Respondent statements such as, but not limited to, "we don't want you here" and "your time is up". Additionally, Respondent would seek us out at the property to confront us and to force us to leave. On or about November 30, 2017, we decided to vacate the subject property due to the ongoing harassment and discrimination from Respondent We believe we were discriminated against and asked to vacate due to mental disability and her mental health crisis that occurred on November 12, 2017.



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-	Allegation 3 -	

I ALLEGE THAT I EXPERIENCED

Harassment
ON OR BEFORE

November 30, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Disability (physical or mental); Association with someone of a protected class

AS A RESULT, I WAS SUBJECTED TO

A hostile living environment

PARTICULARS

We were harassed against and subjected to a hostile living environment at due to mental disability. The Respondents are owner, Shaun-T/CIP Fair Oaks, LLC and onsite property manager,
On or about November 15, 2017, only days after mental health crisis, management issued us an incurable three-day notice to vacate.
On or about November 15 through 30, 2017, we received harassing text messages from Respondent with statements such as, but not limited to, "we don't want you here" and "your time is up". Additionally, Respondent would seek us out at the property to confront us and to force us to leave.
On or about November 30, 2017, we decided to vacate the subject property due to the ongoing harassment and discrimination from Respondent
We believe we were harassed and subjected to a hostile living environment due to her mental health crisis that occurred on November 12, 2017.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

#### SIGNATURE OF COMPLAINANTS OR COMPLAINANTS' LEGAL REPRESENTATIVE:

DATE:



Apr 16, 2018

Apr 16, 2018

#### Housing Discrimination Complaint

Case	ase Number: DFEH Matter	
1.	Date Filed: February 8, 2018 Complainants:	_
2.	Complainant Representatives:	
3.	Other Aggrieved Parties:	
4.	The following is alleged to have occurred or is about to occur:	
	<ul> <li>Discriminatory terms, conditions, privileges, or services and facilitie</li> <li>Failure to make reasonable accommodation</li> </ul>	5
5.	The alleged violation occurred because of:	
	<ul> <li>Handicap</li> </ul>	
6.	Address and location of the property in question (or if no property is invited and state where the discrimination occurred):	olved, the
7.	Respondents:	
	Villaga in the Book Hanne	
	Village in the Park Homeowners' Association c/o Agent for Service of Process	
	315 Diablo Rd Ste 221 Danville, CA 94526	

**RECEIVED** 

S

FEB 1 5 2018

Department of Fair Employment & Housing Elk Grove Village in the Park Homeowners' Association Agent for Service of Process 315 Diablo Rd Ste 221 Danville, CA 94526 DNJ Property Management Services, Inc. DBA Common Interest Management Services Agent for Service of Process c/o 315 Diablo Rd Ste 221 Danville, CA 94526 DNJ Property Management Services, Inc. DBA Common Interest Management Services c/o Agent for Service of Process 315 Diablo Rd Ste 221 Danville, CA 94526

8. The following is a brief and concise statement of the facts regarding the alleged violation:

Complainant is Complainant is a disabled person as defined by the federal Fair Housing Act. Respondents are DNJ Property Management Services, Inc. DBA Common Interest Management Services (HOA management company), (HOA management agent), Village in the Park Homeowners' Association (HOA), and (HOA President).

Complainant's disability makes her sensitive to chemicals, including the fumes from most paints. Exposure to paint fumes results in Complainant experiencing a severe rash, respiratory problems, nauseousness, digestive problems, and puts her at risk of death.

In 2012, the Complainant requested, and the Respondent HOA accommodated, Complainant's request for a reasonable accommodation to have her unit painted using a specific paint called Mystic, which does not exacerbate Complainant's disabilities. In or around November 2017, Complainant learned that all of the units within the HOA would again be painted. Complainant then sent Respondents a request for a reasonable accommodation to again have the interior of her unit painted using Mystic, and she additionally requested that her front door not be painted because it would take months for the fumes to dissipate from the door, and the exposure to the fumes would exacerbate her disability. Shortly after the letter was sent, complainant while she was in her garage sked to speak to Complainant in the street with other individuals from the management company. Complainant asked about her request to use the special paint, and mentioned that she had several cans of leftover paint from the last painting in 2012 that might be useable if

de

they wanted it. informed her that he was aware of her request, but did not want to discuss it. Complainant asked to have a sit-down meeting with the HOA Board regarding the issue, but denied the request.

On January 22, 2018, Respondents posted a notice on Complainant's unit stating that she was forbidden from speaking to any of the workers, including painters. Respondents have not stated when Complainant's unit will be painted, but Complainant learned on January 31, 2018 that painting work has begun on the homes near her property. To date, Respondents have not responded to Complainant's request for an accommodation.

The most recent date on which the alleged discrimination occurred:

January 22, 2018, and is continuing.

- 10. Types of Federal Funding Identified:
- 11. The acts alleged in this complaint, if proven, may constitute a violation of the following sections:

804b or f, and 804f3B of Title VIII of the Civil Rights Act of 1968 as amended by the Fair Housing Act of 1988.

#### Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

2-2-18 Date

N O TE: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.

RECEIVED

FEB 0'8 2018

Dept. of Fair Employment & Housing Los Angeles Regional Office

#### **Housing Discrimination Complaint**

Case	Number:
1.	Complainants:
2.	Complainant Representatives:
3.	Other Aggrieved Parties:
4.	The following is alleged to have occurred or is about to occur:
	<ul> <li>Discriminatory terms, conditions, privileges, or services and facilities</li> <li>Failure to make reasonable accommodation</li> </ul>
5.	The alleged violation occurred because of:
	Handicap
6.	Address and location of the property in question (or if no property is involved, the city and state where the discrimination occurred):
7.	Respondents:
	Village in the Park Homeowners' Association c/o Agent for Service of Process 315 Diablo Rd Ste 221
	Danville, CA 94526

Village in the Park Homeowners' Association Agent for Service of Process 315 Diablo Rd Ste 221 Danville, CA 94526 DNJ Property Management Services, Inc. DBA Common Interest Management Services c/o Agent for Service of Process 315 Diablo Rd Ste 221 Danville, CA 94526 DNJ Property Management Services, Inc. DBA Common Interest Management Services c/o Agent for Service of Process 315 Diablo Rd Ste 221 Danville, CA 94526 The following is a brief and concise statement of the facts regarding the alleged violation: Complainant is Complainant is a disabled person as defined by the federal Fair Housing Act. Respondents are DNJ Property Management Services, Inc. DBA Common Interest Management Services (HOA management company) (HOA management agent), Village in the Park Homeowners' Association (HOA), and. (HOA President). Complainant's disability makes her sensitive to chemicals, including the fumes from most paints. Exposure to paint fumes results in Complainant experiencing a severe rash, respiratory problems, nauseousness, digestive problems, and puts her at risk of death.

8.

In 2012, the Complainant requested, and the Respondent HOA accommodated, Complainant's request for a reasonable accommodation to have her unit painted using a specific paint called Mystic, which does not exacerbate Complainant's disabilities. In or around November 2017, Complainant learned that all of the units within the HOA would again be painted. Complainant then sent Respondents a request for a reasonable accommodation to again have the interior of her unit painted using Mystic, and she additionally requested that her front door not be painted because it would take months for the fumes to dissipate from the door, and the exposure to the fumes would exacerbate her disability. Shortly after the letter was sent, encountered Complainant while she was in her garage. asked to speak to Complainant in the street with other individuals from the management company. Complainant asked about her request to use the special paint, and mentioned that she had several cans of leftover paint from the last painting in 2012 that might be useable if

they wanted it. I informed her that he was aware of her request, but did not want to discuss it. Complainant asked to have a sit-down meeting with the HOA Board regarding the issue, but denied the request.

On January 22, 2018, Respondents posted a notice on Complainant's unit stating that she was forbidden from speaking to any of the workers, including painters. Respondents have not stated when Complainant's unit will be painted, but Complainant learned on January 31, 2018 that painting work has begun on the homes near her property. To date, Respondents have not responded to Complainant's request for an accommodation.

9. The most recent date on which the alleged discrimination occurred:

January 22, 2018, and is continuing.

- 10. Types of Federal Funding Identified:
- 11. The acts alleged in this complaint, if proven, may constitute a violation of the following sections:

804b or f, and 804f3B of Title VIII of the Civil Rights Act of 1968 as amended by the Fair Housing Act of 1988.

Please sign and date this form:

I declare under penalty of perjury that I have read this complaint (including any attachments) and that it is true and correct.

2-2-18 Date

N O T E: HUD WILL FURNISH A COPY OF THIS COMPLAINT TO THE PERSON OR ORGANIZATION AGAINST WHOM IT IS FILED.



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

December 28, 2017

Via [First Class Mail] [Email]

RE: Request to Approve Complaint

**DFEH Number:** 

The Giers Family Associates LLC et al.

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Mario Anzaldua

Associate Governmental Program Analyst

Mario Suzaldia

916-585-8153

mario.anzaldua@dfeh.ca.gov



**DFEH NUMBER** 

COMPLAINANT

**ADDRESS** 

PHONE

TYPE OF DISCRIMINATION AND LAW

Government Code § 12955 Civil Code § 51, et seg.

NAMED IS THE EMPLOYER, PERSON, AGENCY, ORGANIZATION OR GOVERNMENT ENTTITY WHO DISCRIMINATED AGAINST ME

RESPONDENT(S)

The Giers Family Associates LLC

**ADDRESS** 

PHONE

156 Hall Dr. Orinda, CA 94563

Satellite Management Co

1010 East Chestnut Ave. Santa Ana, CA 92701

(714) 558-2411

AGENT FOR SERVICE

Agent for Service for Satellite Management Co

**ADDRESS** 

PHONE

1010 East Chestnut Ave. Santa Ana, CA 92701

(714) 558-2411

Agent for Service for The Giers Family Associates LLC

156 Hall Dr. Orinda, CA 94563

PROPERTY TYPE

Apartment

ADDRESS WHERE VIOLATION

NO. OF UNITS

OCCURRED

78



**DFEH NUMBER** 

- Allegation -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
September 1, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

- a. On or about July 7 2017, while signing my new lease, I asked Respondent accommodation. I needed a shade on my balcony because of my disability [Physical]. Respondent me to not even bother submitting an accommodation request since it would be automatically denied.
- b. On or about August 14, 2017, I submitted my reasonable accommodation request in writing along with my doctor's note since my symptoms had exacerbated. My request went unanswered; Respondent to engage with me in my reasonable accommodation request.
- c. On or about mid September, 2017, I submitted another reasonable accommodation request for the rules and policies to be changed to allow for my reasonable accommodation to be granted. Again, Respondent refused to engage with me in my reasonable accommodation request.

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:	DATE:
	Dec 28, 2017



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

DIRECTOR KEVIN KISH

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 800-884-1684 | TDD 800-700-2320 www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

November 3, 2017

Via email:	
RE: Request to Approve Complaint DFEH Matter Number:	
Housing Authority Of The City Of Los Angeles (HACLA)	
Dear	

This notice confirms that you have filed an inquiry and have been interviewed by a Department of Fair Employment and Housing (DFEH) representative. You must approve, sign and return the complaint before it can be investigated. If you do not approve the language on the complaint, please do not sign the complaint; instead, contact me to discuss your concerns. If you do not return the signed complaint within 10 days, your inquiry will be closed and no further action will be taken.

Please return the signed complaint by mail to DFEH, 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758 or by email to the email address below or by fax to 888•519•5917.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Mario Suzaldia

Sincerely,

Mario Anzaldua

Associate Governmental Program Analyst

916-585-8153

mario.anzaldua@dfeh.ca.gov

# COMPLAINT OF DISCRIMINATION BEFORE THE STATE OF CALIFORNIA DEPARTMENT OF FAIR EMPLOYMENT AND HOUSING Under the California Unruh Civil Rights Act (Civ. Code, § 51)

Complaint of Complainant.	DFEH No.
Co-Complainant	
vs.	
Housing Authority Of The City Of Los Angeles (HACLA), Respondent. 2600 Wilshire Blvd. Los Angeles, CA 90057	2
Co-Respondent Housing Authority Of The City Of Los Angeles (HACLA) 2600 Wilshire Blvd. Los Angeles, CA 90057	
Co-Respondent Housing Authority Of The City Of Los Angeles (HACLA) 2600 Wilshire Blvd. Los Angeles, CA 90057	
THE PARTICULARS ARE:	
1. alleges that responsactions against complainant. Complainant	ndent took the following adverse was denied full or equal
-2-	

accommodations, advantages, facilities, privileges, or services by a business establishment, including both private and public entities because of one or more Fair Employment and Housing Act (which incorporates Civil Code section 51) protected basis: **Disability - [physical or mental]**.

- 2. My belief is based on the following:
- a. On or about January 4, 2017, I requested a reasonable accommodation for a 3 bedroom dwelling to accommodate for our live-in aid to Respondents and The Respondents refused to engage with me in the reasonable accommodation interactive process. They have refused to answer to my calls and emails; to this day I still do not have an answer to my request.
- 3. Complainants

  State of California.

## **VERIFICATION** am the Complainant in the above complaint. I have read the above complaint and know its contents. I declare under penalty of perjury under the laws of the State of California that the above is true and correct of my own knowledge, except as to those matters alleged on information and belief, which I also believe to be true. Signature of Complainant or Complainant's Legal Representative: Date: Dec 18, 2017 Signature of Complainant or Complainant's Legal Representative: Date: Dec 18, 2017

-4-



#### DEPARTMENT OF FAIR EMPLOYMENT & HOUSING

2218 Kausen Drive, Suite 100 | Elk Grove | CA | 95758 (800) 884-1684 | TDD (800) 700-2320 http://www.dfeh.ca.gov | email: contact.center@dfeh.ca.gov

February 2, 2018

Via [First Class Mail] [Email]

DE: Bornest to Annual Court

RE: Request to Approve Complaint
DFEH Number:

Dear

The enclosed draft complaint is the result of your interview with me. Please read the proposed complaint carefully. If you agree with the language, please sign and return the complaint via mail, email or fax. If you do not approve of the language on the complaint, do not sign it; instead, contact me to discuss your concerns. My mailing address is:

Department of Fair Employment and Housing 2218 Kausen Dr. Suite 100 Elk Grove, CA 95758

You may also return the complaint to me by email at mario.anzaldua@dfeh.ca.gov or by fax to 1-888-519-5917.

Please return the signed complaint or contact me with your concerns as soon as possible as we cannot begin our investigation until we have received your signed complaint. The law requires that a complaint be filed within one (1) year from the date of the discriminatory act.

If you do not return the signed complaint or contact me within ten (10) calendar days from the date of this letter, your case will be closed.

Please note that the information you provided is subjected to the Department's privacy policy and the California Public Records Act, Government Code section 6250 et seq.

Thank you for your cooperation.

Sincerely,

Mario Anzaldua Associate Governmental Program Analyst 916-585-8153 mario.anzaldua@dfeh.ca.gov



DFEH NUMBER		
COMPLAINANT	ADDRESS	PHONE
		TYPE OF DISCRIMINATION AND LAW
		Government Code § 12955 Civil Code § 51, et seq.
NAMED IS THE EMPLOYER, PERSO	ON, AGENCY, ORGANIZATION OR GOVERNME	NT ENTTITY WHO DISCRIMINATED AGAINST ME
RESPONDENT(S)	ADDRESS	PHONE
PROPERTY TYPE	ADDRESS WHERE VIOLATION OCCURRED	NO. OF UNITS
Other		11
I ALLEGE THAT I EXPERIENCE Harassment ON OR BEFORE March 8, 2017 BECAUSE OF MY ACTUAL OF Disability (physical or mental)		
PARTICULARS  a. On or about March 6, 2017 L Respondents	requested a reasonable accommodation mocked my request to my face. Respor in investigator, and she stated that she k days, including her.	ndent nsinuated I was Iving She



#### DFEH NUMBER

b. On or about March 8, 2017, I received a long email from the Respondents with ESA definitions and threats of what could legally happen to someone who is lying or submitting false requests.

- Allegation 2 -

I ALLEGE THAT I EXPERIENCED
Discrimination
ON OR BEFORE
March 10, 2017
BECAUSE OF MY ACTUAL OR PERCEIVED
Disability (physical or mental)
AS A RESULT, I WAS SUBJECTED TO

Denied reasonable accommodation for a disability or medical condition

#### **PARTICULARS**

a. On or about March 10, 2017, my doctor submitted my ESA recommendation letter directly to the Respondents. The Respondents denied my reasonable accommodation based on the letter not meeting their requirements. Later that day, my doctor resent the letter with their requirements. I also sent the letter via certified mail. The Respondents failed to engage with me in the interactive process to my reasonable accommodation requests.

- Allegation 3 -

#### I ALLEGE THAT I EXPERIENCED

Retaliation

ON OR BEFORE

October 23, 2017

BECAUSE OF MY ACTUAL OR PERCEIVED

Requested or used a disability-related accommodation

AS A RESULT, I WAS SUBJECTED TO

Denied equal terms and conditions

#### **PARTICULARS**

- a. On or about the first week of October 23, 2017, in retaliation for requesting and having my ESA, I received a very restrictive and different lease from what I had originally signed and what other tenants were receiving.
- b. On or about November, 5, 2017, I responded to management in regards to the differing terms. I was eventually provided the standard lease I originally signed.



#### **DFEH NUMBER**

#### SIGNED UNDER PENALTY OF PERJURY

By submitting this complaint I am declaring under penalty of perjury under the laws of the State of California that the foregoing is true and correct of my own knowledge, except as to matters stated on my information and belief, and as to those matters I believe them to be true.

SIGNATURE OF COMPLAINANT OR COMPLAINANT'S LEGAL REPRESENTATIVE:

DATE:

Feb 2, 2018